

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (2-21)**  
**STATE: LA**  
**APPLICATION YEAR: 2010**

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**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2010**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: LA**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])  
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 13,363,275

A.Preventive and primary care for children:

\$ 4,942,633 ( 36.99%)

B.Children with special health care needs:

\$ 4,754,000 ( 35.58%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 1,336,327 ( 10%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 1,739,358

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 24,946,186

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 952,266

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 0

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 9,838,258

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 6,207,276

\$ 35,736,710

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 50,839,343

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 94,644

c. CISS: \$ 0

d. Abstinence Education: \$ 0

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 0

j. Education: \$ 0

k. Other: \$ 0

Early Childhood \$ 245,000

Oral Health \$ 114,590

Perinatal depression \$ 272,436

PRAMS \$ 145,210

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 871,880

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 51,711,223

<b>FORM NOTES FOR FORM 2</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506(a)(1-3)]*

**STATE: LA**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 14,293,453	\$ 14,179,477	\$ 14,203,523	\$ 10,803,400	\$ 13,565,030	\$ 9,185,490
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 2,191,723	\$ 2,191,723	\$ 371,477	\$ 371,477	\$ 425,562	\$ 425,562
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 22,542,122	\$ 19,402,480	\$ 20,280,126	\$ 21,137,005	\$ 22,567,994	\$ 21,625,754
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 745,605	\$ 646,724	\$ 646,724	\$ 761,823	\$ 770,946	\$ 1,001,196
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 5,439,100	\$ 8,197,779	\$ 9,378,069	\$ 7,158,104	\$ 8,261,159	\$ 7,965,934
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 45,212,003	\$ 44,618,183	\$ 44,879,919	\$ 40,231,809	\$ 45,590,691	\$ 40,203,936
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 382,000	\$ 396,729	\$ 7,306,166	\$ 6,627,904	\$ 370,674	\$ 396,023
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 45,594,003	\$ 45,014,912	\$ 52,186,085	\$ 46,859,713	\$ 45,961,365	\$ 40,599,959
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

[Secs. 505(a) and 506(a)(1-3)]

**STATE: LA**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> (Line1, Form 2)	\$ 13,565,030	\$ 11,590,159	\$ 13,491,772	\$	\$ 13,363,275	\$
<b>2. Unobligated Balance</b> (Line2, Form 2)	\$ 448,170	\$ 448,170	\$ 2,370,420	\$	\$ 1,739,358	\$
<b>3. State Funds</b> (Line3, Form 2)	\$ 20,924,855	\$ 23,811,254	\$ 23,712,908	\$	\$ 24,946,186	\$
<b>4. Local MCH Funds</b> (Line4, Form 2)	\$ 1,544,839	\$ 841,609	\$ 867,504	\$	\$ 952,266	\$
<b>5. Other Funds</b> (Line5, Form 2)	\$ 0	\$ 0	\$ 0	\$	\$ 0	\$
<b>6. Program Income</b> (Line6, Form 2)	\$ 9,036,529	\$ 8,134,793	\$ 9,145,374	\$	\$ 9,838,258	\$
<b>7. Subtotal</b> (Line8, Form 2)	\$ 45,519,423	\$ 44,825,985	\$ 49,587,978	\$ 0	\$ 50,839,343	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> (Line10, Form 2)	\$ 870,469	\$ 815,980	\$ 731,366	\$	\$ 871,880	\$
<b>9. Total</b> (Line11, Form 2)	\$ 46,389,892	\$ 45,641,965	\$ 50,319,344	\$ 0	\$ 51,711,223	\$ 0
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

1. **Section Number:** Form3\_Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
Additional state funding was available in FY 2008, requiring less federal funding to cover expenditures.
2. **Section Number:** Form3\_Main  
**Field Name:** FedAllocExpended  
**Row Name:** Federal Allocation  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
FY 2007 budgeted amount for Federal Allocation continued to be higher than the expended amount due to the impact of Hurricanes Katrina and Rita. The attrition in agency and contract staff continued and recruiting staff in the hurricane impacted areas continued to be problematic.
3. **Section Number:** Form3\_Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
Additional state funding was available and utilized in FY 2008.
4. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
Additional state funding was available and utilized in FY 2008, requiring less local funding to cover expenditures.
5. **Section Number:** Form3\_Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
FY 2007 Local MCH Funds were budgeted low due to Hurricanes Katrina and Rita, but funding and need increased by the end of the fiscal year.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: LA**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 8,021,448	\$ 9,043,193	\$ 9,721,712	\$ 7,719,773	\$ 8,915,937	\$ 7,249,303
b. Infants < 1 year old	\$ 7,530,362	\$ 7,199,606	\$ 6,759,716	\$ 7,493,904	\$ 8,767,553	\$ 6,934,901
c. Children 1 to 22 years old	\$ 14,992,863	\$ 14,564,434	\$ 14,441,069	\$ 13,343,032	\$ 14,510,295	\$ 13,364,150
d. Children with Special Healthcare Needs	\$ 8,552,150	\$ 7,488,755	\$ 8,103,984	\$ 8,334,818	\$ 7,494,102	\$ 8,450,373
e. Others	\$ 1,738,660	\$ 1,701,434	\$ 1,758,712	\$ 398,582	\$ 1,656,617	\$ 890,522
f. Administration	\$ 4,376,520	\$ 4,620,761	\$ 4,094,726	\$ 2,941,700	\$ 4,246,187	\$ 3,314,687
g. SUBTOTAL	\$ 45,212,003	\$ 44,618,183	\$ 44,879,919	\$ 40,231,809	\$ 45,590,691	\$ 40,203,936
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 50,000		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 0		\$ 0	
j. Education	\$ 0		\$ 6,935,492		\$ 0	
k. Other						
Early Childhood	\$ 100,000		\$ 140,000		\$ 140,000	
PRAMS	\$ 132,000		\$ 130,674		\$ 130,674	
<b>III. SUBTOTAL</b>	\$ 382,000		\$ 7,306,166		\$ 370,674	

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: LA**

	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 8,050,970	\$ 8,365,427	\$ 8,803,410	\$	\$ 8,434,455	\$
b. Infants < 1 year old	\$ 9,341,777	\$ 7,988,941	\$ 9,702,217	\$	\$ 12,138,344	\$
c. Children 1 to 22 years old	\$ 15,074,185	\$ 15,201,519	\$ 16,752,697	\$	\$ 15,366,017	\$
d. Children with Special Healthcare Needs	\$ 8,349,040	\$ 8,183,221	\$ 8,640,275	\$	\$ 8,620,258	\$
e. Others	\$ 1,712,877	\$ 874,615	\$ 2,087,433	\$	\$ 1,669,647	\$
f. Administration	\$ 2,990,574	\$ 4,212,262	\$ 3,601,946	\$	\$ 4,610,622	\$
g. SUBTOTAL	\$ 45,519,423	\$ 44,825,985	\$ 49,587,978	\$ 0	\$ 50,839,343	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 94,644		\$ 94,644		\$ 94,644	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 0		\$ 0		\$ 0	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 0		\$ 0		\$ 0	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
Early Childhood	\$ 0		\$ 140,000		\$ 245,000	
Oral Health	\$ 114,590		\$ 200,740		\$ 114,590	
Perinatal depression	\$ 0		\$ 0		\$ 272,436	
PRAMS	\$ 171,846		\$ 145,982		\$ 145,210	
Perinatal Depression	\$ 197,747		\$ 150,000		\$ 0	
Early Child	\$ 141,642		\$ 0		\$ 0	
Newborn Hearing Scre	\$ 150,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 870,469		\$ 731,366		\$ 871,880	



## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

- 1. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** PregWomenExpended  
**Row Name:** Pregnant Women  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Pregnant Women expenditures were lower than budgeted amount for FY 2007 due to loss of clinic facilities and providers in the New Orleans region due to Hurricane Katrina. Prenatal clinics funded by MCH continued to be closed during FY 2007.
- 2. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
FY 2008 expenditures were consistent with previous years while the budgeted amount was set too high.
- 3. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Infant expenditures were lower than budgeted amount for FY 2007 due to loss of agency and contract staff in the areas impacted by Hurricanes Katrina and Rita.
- 4. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
CSHCN budgeted amount was set too low anticipating similar reductions as found in other populations. Since there was a drastic loss of pediatric subspecialists in the hurricane affected areas, the CSHCN Program provided a greater amount of direct clinical services because the need was so great.
- 5. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
Additional state funding was available in FY 2008, requiring less federal funding to cover expenditures for family planning services.
- 6. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
Others expenditure was lower than budgeted amount for FY 2007 due to loss of the largest Family Planning clinic facility in New Orleans.
- 7. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
The FY 2008 budget was set too low and the expenditures grew at a consistent level over the past few years post-hurricanes Katrina and Rita.
- 8. Section Number:** Form4\_I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
The overall expenditures for FY 2007 continued to be lower than the budgeted amount due to the loss of agency and contract staff due to Hurricanes Katrina and Rita, resulting in lower expenditures for Administration.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: LA**

TYPE OF SERVICE	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 20,424,822	\$ 19,136,428	\$ 20,103,603	\$ 15,579,019	\$ 19,553,530	\$ 16,427,029
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 14,443,621	\$ 15,617,241	\$ 14,199,597	\$ 13,466,072	\$ 15,957,638	\$ 13,431,548
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 8,050,068	\$ 8,146,493	\$ 8,608,760	\$ 9,378,244	\$ 8,324,056	\$ 8,749,056
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,293,492	\$ 1,718,021	\$ 1,967,959	\$ 1,808,474	\$ 1,755,467	\$ 1,596,303
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 45,212,003	\$ 44,618,183	\$ 44,879,919	\$ 40,231,809	\$ 45,590,691	\$ 40,203,936

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: LA**

TYPE OF SERVICE	FY 2008		FY 2009		FY 2010	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 17,626,550	\$ 17,329,753	\$ 19,561,277		\$ 18,302,163	
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 15,235,900	\$ 16,579,590	\$ 16,610,817		\$ 18,793,770	
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 10,610,814	\$ 9,137,002	\$ 11,352,345		\$ 11,201,442	
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 2,046,159	\$ 1,779,640	\$ 2,063,539		\$ 2,541,968	
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 45,519,423	\$ 44,825,985	\$ 49,587,978	\$ 0	\$ 50,839,343	\$ 0

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

1. **Section Number:** Form5\_Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
The overall expenditures for FY 2007 continued to be lower than the budgeted amount due to the loss of agency and contract staff due to Hurricanes Katrina and Rita, resulting in lower expenditures for direct services.
2. **Section Number:** Form5\_Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2007  
**Field Note:**  
The overall expenditures for FY 2007 continued to be lower than the budgeted amount due to the loss of agency and contract staff due to Hurricanes Katrina and Rita, resulting in lower expenditures for enabling services.
3. **Section Number:** Form5\_Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
FY 2008 expenditures were consistent with previous years while the budgeted amount was set too high.
4. **Section Number:** Form5\_Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2008  
**Field Note:**  
FY 2008 expenditures were consistent with previous years while the budgeted amount was set too high.

**FORM 6**

**NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED**

*Sect. 506(a)(2)(B)(iii)*

**STATE: LA**

**Total Births by Occurrence:** 65,000

**Reporting Year: 2008**

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	64,429	99.1	9	1	1	100
Congenital Hypothyroidism	64,429	99.1	678	42	42	100
Galactosemia	64,429	99.1	47	2	2	100
Sickle Cell Disease	64,429	99.1	142	82	82	100
<b>Other Screening (Specify)</b>						
Biotinidase Deficiency	64,429	99.1	21	7	7	100
Cystic Fibrosis	64,429	99.1	171	11	11	100
Argininosuccinic Acidemia	64,429	99.1	2	1	1	100
Citrullinemia	64,429	99.1	2	1	1	100
Propionic Acidemia	64,429	99.1	57	2	2	100
Carnitine Uptake Defect	64,429	99.1	23	1	1	100
3-Methylcrotonyl-CoA Carboxylase Deficiency	64,429	99.1	33	4	4	100
Glutaric Acidemia Type I	64,429	99.1	9	1	1	100
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	64,429	99.1	30	2	2	100
Methylmalonic Acidemia (Mutase Deficiency)	64,429	99.1	57	2	2	100

**Screening Programs for Older Children & Women (Specify Tests by name)**

- (1) Use occurrent births as denominator.  
 (2) Report only those from resident births.  
 (3) Use number of confirmed cases as denominator.

<b>FORM NOTES FOR FORM 6</b>
None
<b>FIELD LEVEL NOTES</b>
None

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

[Sec. 506(a)(2)(A)(i-ii)]

**STATE: LA**

**Reporting Year: 2008**

	TITLE V	PRIMARY SOURCES OF COVERAGE				
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	57,851	70.0			30.0	
Infants < 1 year old	64,429	71.0		29.0		
Children 1 to 22 years old	80,019	66.0		23.0	7.0	4.0
Children with Special Healthcare Needs	10,528	88.6	0.0	8.8	2.4	0.2
Others	0					
<b>TOTAL</b>	<b>212,827</b>					

## FORM NOTES FOR FORM 7

None

### FIELD LEVEL NOTES

- 1. Section Number:** Form7\_Main  
**Field Name:** PregWomen\_TS  
**Row Name:** Pregnant Women  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Unduplicated count of Maternity patients for SFY 2008 based upon the COMPASS patient encounter system. Due to encounter system's inability to decipher between pregnant women and non-pregnant women seeking pregnancy tests in the public health units, all women of reproductive age receiving pregnancy tests in the health units are reported under pregnant women. The count also includes women served by contracts that do not report through COMPASS, or 418 initial prenatal visits, and women participating in the Nurse Family Partnership home visitation program, or 1962 families in SFY 2008.
- 2. Section Number:** Form7\_Main  
**Field Name:** PregWomen\_XIX  
**Row Name:** Pregnant Women  
**Column Name:** Title XIX %  
**Year:** 2010  
**Field Note:**  
Based upon Maternity Medicaid paid clients reported in the COMPASS patient encounter system. No other insurance breakdown is given.
- 3. Section Number:** Form7\_Main  
**Field Name:** Children\_0\_1\_TS  
**Row Name:** Infants <1 year of age  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Infants: The number of newborns receiving a newborn screen in 2008. The total number of infants who actually received child health services at a parish health unit was 51,294. Percents of the Primary Source of Coverage are derived from newborn screening lab form data. Estimates are based on source of payments.
- 4. Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_TS  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
This year includes the count of individuals served from the Adolescent School Based Health initiative, in SFY 2007-08 = 28,494 plus individuals served in the parish health units, as reported from the Patient Encounter System via COGNOS.
- 5. Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_XIX  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Title XIX %  
**Year:** 2010  
**Field Note:**  
Adolescent School Based Health shows 66% are paid for by Medicaid. Number includes LaCHIP coverage because ASBH cannot separate LaCHIP and Medicaid recipients
- 6. Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_Private  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Private/Other %  
**Year:** 2010  
**Field Note:**  
Adolescent School Based Health shows 23% are paid for by private providers.
- 7. Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_None  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** None %  
**Year:** 2010  
**Field Note:**  
Adolescent School Based Health shows 7% of their clients had no coverage.
- 8. Section Number:** Form7\_Main  
**Field Name:** Children\_1\_22\_Unknown  
**Row Name:** Children 1 to 22 years of age  
**Column Name:** Unknown %  
**Year:** 2010  
**Field Note:**  
Adolescent School Based Health shows that for 4% of their clients, source of coverage is unknown.
- 9. Section Number:** Form7\_Main  
**Field Name:** AllOthers\_TS  
**Row Name:** Others  
**Column Name:** Title V Total Served  
**Year:** 2010  
**Field Note:**  
Due to record keeping system's inability to decipher between pregnant women and non-pregnant women seeking pregnancy tests in the public health units, all women of reproductive age receiving pregnancy tests in the health units are reported under pregnant women.



**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: LA**

Reporting Year: 2007

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	66,686	38,269	25,691	484	1,154	9	1,079	0
Title V Served	55,471	27,687	26,204	201	479	87	166	647
Eligible for Title XIX	39,553	15,744	19,565	182	420	34	334	3,274
<b>INFANTS</b>								
Total Infants in State	65,656	37,466	25,500	481	1,131	9	1,069	0
Title V Served	51,294	24,831	24,700	189	481	99	629	365
Eligible for Title XIX	48,208	18,943	23,797	210	466	25	569	4,198

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	63,364	3,230	92	1,501	79	137	1,328	185
Title V Served	52,957	2,514	0					2,514
Eligible for Title XIX	35,991	2,080	1,482					2,080
<b>INFANTS</b>								
Total Infants in State	62,431	3,166	59	1,463	78	131	1,314	180
Title V Served	49,048	2,246	0					2,246
Eligible for Title XIX	43,609	2,780	1,789					2,780

## FORM NOTES FOR FORM 8

None

### FIELD LEVEL NOTES

1. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** DeliveriesTotal\_All  
**Row Name:** Total Deliveries in State  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
Vital Records Birth Files preliminary 2007 data.
2. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** DeliveriesTitleV\_All  
**Row Name:** Title V Served  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
SOURCE: COMPASS patient encounter system for SFY 2008. Based upon unduplicated count of maternity patients. Due to the system's inability to decipher between pregnant women and non-pregnant women seeking pregnancy tests in the public health units, all women of reproductive age receiving pregnancy tests in the health units are reported under deliveries.
3. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** DeliveriesTitleXIX\_All  
**Row Name:** Eligible for Title XIX  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008.
4. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** DeliveriesTitleXIX\_More  
**Row Name:** Eligible for Title XIX  
**Column Name:** More Than One Race Reported  
**Year:** 2010  
**Field Note:**  
From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. Includes More than One Race and Hispanic or Latino and one or more races.
5. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** DeliveriesTitleXIX\_RaceOther  
**Row Name:** Eligible for Title XIX  
**Column Name:** Other and Unknown  
**Year:** 2010  
**Field Note:**  
From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. Includes Hispanic or Latino (no other race information), Race Unknown and Invalid Race Codes.
6. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** InfantsTotal\_All  
**Row Name:** Total Infants in State  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
Louisiana Vital Statistics 2007 preliminary data.
7. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** InfantsTitleV\_All  
**Row Name:** Title V Served  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
SOURCE: COMPASS patient encounter system for SFY 2008.
8. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** InfantsTitleXIX\_All  
**Row Name:** Eligible for Title XIX  
**Column Name:** Total All Races  
**Year:** 2010  
**Field Note:**  
From Medicaid Special Report, LIFT 6286 Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008.
9. **Section Number:** Form8\_I. Unduplicated Count By Race  
**Field Name:** InfantsTitleXIX\_More  
**Row Name:** Eligible for Title XIX  
**Column Name:** More Than One Race Reported  
**Year:** 2010  
**Field Note:**  
From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. Includes More than One Race and Hispanic or Latino and one or more races.
10. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_TotalNotHispanic  
**Row Name:** Total Deliveries in State  
**Column Name:** Total Not Hispanic or Latino  
**Year:** 2010  
**Field Note:**  
Louisiana Vital Statistics 2007 preliminary data.
11. **Section Number:** Form8\_II. Unduplicated Count by Ethnicity  
**Field Name:** DeliveriesTotal\_TotalHispanic  
**Row Name:** Total Deliveries in State  
**Column Name:** Total Hispanic or Latino  
**Year:** 2010

**Field Note:**  
Louisiana Vital Statistics 2007 preliminary data.

**12. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTotal\_NotReported

**Row Name:** Total Deliveries in State

**Column Name:** Ethnicity Not Reported

**Year:** 2010

**Field Note:**

Louisiana Vital Statistics 2007 preliminary data.

**13. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleV\_TotalHispanic

**Row Name:** Title V Served

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Source: COMPASS patient encounter system for SFY 2008. No additional breakdown by ethnicity is available.

**14. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleV\_EthnicityOther

**Row Name:** Title V Served

**Column Name:** Other and Unknown

**Year:** 2010

**Field Note:**

Source: COMPASS patient encounter system for SFY 2008. No additional breakdown by ethnicity is available.

**15. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleXIX\_EthnicityOther

**Row Name:** Eligible for Title XIX

**Column Name:** Other and Unknown

**Year:** 2010

**Field Note:**

From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. No other breakdown by ethnicity is available.

**16. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalNotHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Not Hispanic or Latino

**Year:** 2010

**Field Note:**

Louisiana Vital Statistics 2007 preliminary data.

**17. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

Louisiana Vital Statistics 2007 preliminary data.

**18. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_NotReported

**Row Name:** Total Infants in State

**Column Name:** Ethnicity Not Reported

**Year:** 2010

**Field Note:**

Louisiana Vital Statistics 2007 preliminary data.

**19. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_TotalHispanic

**Row Name:** Title V Served

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

COMPASS patient encounter system for SFY 2008. No additional breakdown by ethnicity is available.

**20. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_EthnicityOther

**Row Name:** Title V Served

**Column Name:** Other and Unknown

**Year:** 2010

**Field Note:**

COMPASS patient encounter system for SFY 2008. No additional breakdown by ethnicity is available.

**21. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_TotalNotHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Not Hispanic or Latino

**Year:** 2010

**Field Note:**

Source: Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. No further breakdown by ethnicity is available.

**22. Section Number:** Form8\_II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2010

**Field Note:**

From Medicaid Special Report, LIFT 6286, Unduplicated Eligibility Count by age and race description. FFY October 2007 - September 2008. Includes Hispanic or Latino (no other race information) and Hispanic or Latino and one or more races. No further breakdown by ethnicity is available.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: LA**

	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>
1. State MCH Toll-Free "Hotline" Telephone Number	800) 251 - BABY	(800) 251 - BABY	(800) 251 - BABY	(800) 251-BABY	(800) 251-BABY
2. State MCH Toll-Free "Hotline" Name	Partners for Healthy Babies	Partners for Healthy Babies	Partners for Healthy Babies	Partners for Healthy Babies	Partners for Healthy Babies
3. Name of Contact Person for State MCH "Hotline"	Karis Schoellmann	Karis Schoellmann	Karis Schoellmann	Karis Schoellmann	Karis Schoellmann
4. Contact Person's Telephone Number	504-568-3504	504-219-4572	504-219-4572	(504) 219-4572	(504) 568-5073
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	3,926	7,311	11,284

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: LA**

	<b>FY 2010</b>	<b>FY 2009</b>	<b>FY 2008</b>	<b>FY 2007</b>	<b>FY 2006</b>
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Contact Person's Email					
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

**FORM NOTES FOR FORM 9**

None

**FIELD LEVEL NOTES**

None

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2010**  
*[SEC. 506(A)(1)]*  
**STATE: LA**

1. State MCH Administration:  
(max 2500 characters)

Louisiana's Title V program is administered by the State Sections of Maternal and Child Health and Children's Special Health Services. These programs are housed within the Office of Public Health's Center for Preventive Health. The Office of Public Health is one of the five major agencies within the Louisiana Department of Health and Hospitals. MCH/CSHS Programs provide personal health services and local public health functions at parish health units distributed throughout the State. The MCH program serves a large portion of the State's MCH population, providing outreach and case management; health education and social marketing campaigns to address the leading causes of morbidity and mortality of the MCH population; and infrastructure building services including surveillance, needs assessment, and building systems of care for high risk populations.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 13,363,275
3. Unobligated balance (Line 2, Form 2)	\$ 1,739,358
4. State Funds (Line 3, Form 2)	\$ 24,946,186
5. Local MCH Funds (Line 4, Form 2)	\$ 952,266
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 9,838,258
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 50,839,343</b>

9. Most significant providers receiving MCH funds:

Parish Health Units, Louisiana State University  
Health Sciences Center, Primary Care Centers,  
New Orleans Health Dept., Tulane University Health  
Sciences Center, Children's Hospital Hew Orleans

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	57,851
b. Infants < 1 year old	64,429
c. Children 1 to 22 years old	80,019
d. CSHCN	10,528
e. Others	0

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Parish Health Units: MCH provides prenatal care services and comprehensive preventive child health services at parish health units and contract agency sites in areas with health access problems. School-Based Health Centers: MCH's Adolescent School Health Initiative funds and provides technical assistance to 69 school-based health centers statewide. Home Visitation: MCH operates a nurse home visitation program for first-time mothers, entitled Nurse Family Partnership (NFP) in all regions of the state. Children with Special Health Care Needs: CSHS provides direct medical evaluation and treatment services for chronic and disabling medical conditions in children. Parent support and care coordination services are also provided by CSHS.

b. Population-Based Services:  
(max 2500 characters)

Sudden Infant Death Syndrome (SIDS) Program: MCH operates a risk reduction campaign, and provides public and professional education, grief counseling and autopsy and death scene investigation. Partners For Healthy Babies: MCH operates a statewide multimedia campaign which utilizes a toll free hotline to link callers with prenatal care, and educates about healthy behaviors during pregnancy. Newborn Screening Programs: The Genetics and Newborn Screening Program assures the screening of all newborns in the State. The Hearing, Speech, and Vision Program coordinates newborn hearing screening statewide. Injury Prevention: MCH funds regional injury prevention coordinators to inform the public of injury prevention approaches.

c. Infrastructure Building Services:  
(max 2500 characters)

MCH operates the Pregnancy Risk Assessment and Monitoring System (PRAMS). Birth and infant death data are analyzed and includes linkages with Medicaid and Newborn Screening programs. The CSHS program has initiated a medical home project to increase primary care access to CSHCN. CSHS has taken leadership in developing a birth defects registry for Louisiana. MCH has initiated an infant mortality reduction initiative effort in each region with public and private partner agencies. In conjunction with the state Office of Mental Health and Office of Addictive Disorders, MCH coordinates a screening, referral, and treatment program for perinatal substance abuse, depression, and domestic violence. MCH monitors pregnancy, birth, infant, and child death data to target resources which address leading causes of death.

12. The primary Title V Program contact person:

Name	Joan Wightkin, DrPH, MPH
Title	MCH Administrator
Address	1010 Common St., Suite 2710
City	New Orleans

13. The children with special health care needs (CSHCN) contact person:

Name	Susan Berry, MD
Title	CSHCN Director
Address	P.O. 60630
City	New Orleans

State	Louisiana
Zip	70112
Phone	504-568-3506
Fax	504-568-3503
Email	Joan.Wightkin@la.gov
Web	

State	Louisiana
Zip	70160
Phone	504-568-5055
Fax	504-568-7529
Email	Susan.Berry@la.gov
Web	

**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None



**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]  
**STATE: LA**

**Form Level Notes for Form 11**

None

**PERFORMANCE MEASURE # 01**

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	95	95	99	99	99
Annual Indicator	94.2	96.0	99.1	97.9	98.8
Numerator	114	120	116	137	159
Denominator	121	125	117	140	161
Data Source					Louisiana Genetics Database
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

**1. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is for calendar year.

**2. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is for calendar year.

**3. Section Number:** Form11\_Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is for calendar year.

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<b>Annual Objective and Performance Data</b>					
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Performance Objective</b>	60	60	60	62	65
<b>Annual Indicator</b>	55.2	55.2	55.2	62.2	62.2
<b>Numerator</b>					
<b>Denominator</b>					
<b>Data Source</b>					National Survey of CSHCN
<b>Check this box if you cannot report the numerator because</b> 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Final	Final

<b>Annual Objective and Performance Data</b>					
	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>Annual Performance Objective</b>	65	65	65	70	70
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #2

**Field Name:** PM02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	50	50	50	55	55
Annual Indicator	48.8	48.8	48.8	49.6	49.6
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because					
1. There are fewer than 5 events over the last year, and					
2. The average number of events over the last 3 years is fewer					
than 5 and therefore a 3-year moving average cannot be					
applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	55	55	55	55	55
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2008**Field Note:**

The data reported in 2008 are pre-populated with the data from 2007 for this performance measure.

**2. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2007**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

**3. Section Number:** Form11\_Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2006**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	57	55	55	57	70
Annual Indicator	51.9	51.9	51.9	65.5	65.5
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	70	70	70	75	75
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The data reported in 2008 are pre-populated with the data from 2007 for this performance measure.

2. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

3. **Section Number:** Form11\_Performance Measure #4

**Field Name:** PM04

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	70	70	70	75	90
Annual Indicator	68.8	68.8	89.3	89.3	89.3
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	90	90	90	92	92
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

2. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

3. **Section Number:** Form11\_Performance Measure #5

**Field Name:** PM05

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	10	6	6	10	44
Annual Indicator	5.8	5.8	5.8	40.9	40.9
Numerator					
Denominator					
Data Source					National Survey of CSHCN
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	44	44	44	44	44
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The data reported in 2008 are pre-populated with the data from 2007 for this performance measure.

2. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

3. **Section Number:** Form11\_Performance Measure #6

**Field Name:** PM06

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	72	74	80	84	82
Annual Indicator	74.9	74.9	72.3	77	77
Numerator					
Denominator					
Data Source					The National Immunization Survey (NIS)
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>82</u>	<u>85</u>	<u>87</u>	<u>90</u>	<u>90</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data if provisional and based upon 2007 data.

**2. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2007**Field Note:**

The National Immunization Survey (NIS) is sponsored by the National Immunization Program (NIP) and conducted jointly by NIP and the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention. The survey is a list-assisted random-digit-dialing telephone survey followed by a mailed survey to children's immunization providers. Estimates of vaccine coverage are produced for the nation and for each of 78 Immunization Action Plan (IAP) areas, consisting of the 50 states, the District of Columbia, and 27 large urban areas. Final 2007 data from the NIS survey for Louisiana indicates 77 + 6.1% of children within the ages of 19-35 months are at the appropriate immunization level for age for the vaccine series 4:3:1:3:3:1 which now includes 1 dose of Varicella vaccine in the series.

**3. Section Number:** Form11\_Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2006**Field Note:**

The National Immunization Survey (NIS) is sponsored by the National Immunization Program (NIP) and conducted jointly by NIP and the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention. The survey is a list-assisted random-digit-dialing telephone survey followed by a mailed survey to children's immunization providers. Estimates of vaccine coverage are produced for the nation and for each of 78 Immunization Action Plan (IAP) areas, consisting of the 50 states, the District of Columbia, and 27 large urban areas. Final 2006 data from the NIS survey for Louisiana indicates 72.3 + 6.9% of children within the ages of 19 – 35 months are at the appropriate immunization level for age for the vaccine series 4:3:1:3:3:1 which now includes 1 dose of Varicella vaccine in the series.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	31	30	29	25	25
Annual Indicator	29.2	26.6	30.0	30.6	30.6
Numerator	2,955	2,670	2,824	2,861	2,861
Denominator	101,048	100,211	94,142	93,471	93,471
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	24.5	24	24	24	24
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Data for 2008 is provisional and based upon 2007 data.
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data for 2007 is provisional.
- Section Number:** Form11\_Performance Measure #8  
**Field Name:** PM08  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 The 2006 data is final



**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	20	20	20	20	23
Annual Indicator	18.0	18.0	18.0	18.0	33.2
Numerator	157	157	157	157	16,223
Denominator	871	871	871	871	48,894
Data Source					Basic Screening Survey 2008
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional
<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	40	40	40	40	40
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2008**Field Note:**

The real values for the numerator (N) and denominator (D) are 899 and 2634 and the weighted values of N and D have been used to calculate annual indicator. The State Oral Health Program has preliminary results of the Basic Screening Survey. According to these results, 33.2% of Louisiana 3rd grade children have dental sealants on at least one of their permanent molar teeth. There are 41.9% percent of children with untreated caries and 65.7% of children with caries experience.

**2. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2007**Field Note:**

The State Oral Health Program has begun collecting sealant prevalence data on 3rd graders statewide, every 5 years. This data is used to tabulate the sealant prevalence rate for FY2006 because the Oral Health Program is confident that this data more accurately reflects the sealant status of this population than the data previously collected more than 5 years ago.

**3. Section Number:** Form11\_Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2006**Field Note:**

The State Oral Health Program has begun collecting sealant prevalence data on 3rd graders statewide, every 5 years. This data is used to tabulate the sealant prevalence rate for FY2006 because the Oral Health Program is confident that this data more accurately reflects the sealant status of this population than the data previously collected more than 5 years ago.

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	6.7	6.7	6.7	4	4
Annual Indicator	7.0	5.2	4.8	5.7	5.7
Numerator	67	49	43	51	51
Denominator	963,046	946,320	897,508	888,587	888,587
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	4	4	4	4	4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 2008 data is provisional and based upon the 2007 data.
- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2007 data is provisional.
- Section Number:** Form11\_Performance Measure #10  
**Field Name:** PM10  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 2006 data is provisional.

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			10.4	15.6	15.8
Annual Indicator	15.2	15.2	15.2	21.9	21.9
Numerator	9,253	9,253	9,253	66	66
Denominator	60,873	60,873	60,873	302	302
Data Source					National Immunization Survey (NIS)
Do not report the numerator because there are fewer than 5 events over the last year, and fewer than 5 events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>25</u>	<u>26</u>	<u>27</u>	<u>28</u>	<u>29</u>
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

This year's data is provisional and based upon 2005 National Immunization Survey (NIS) data. LaPRAMS 2006 data indicated that 17.02% of mothers breastfed their infants at 6 months of age, however, LaPRAMS has not reached 70% response rate since Hurricane Katrina in 2005 and therefore data is unreliable. Furthermore, infants are between 2 and 6 months at the time of the survey, which may lend bias to the question of breastfeeding at six months.

2. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is provisional and based upon 2005 NIS data.

3. **Section Number:** Form11\_Performance Measure #11

**Field Name:** PM11

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is provisional and based upon 2004 PRAMS Data.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	93	95	98	98	98
Annual Indicator	95.9	96.3	95.9	96.6	96.8
Numerator	61,984	41,228	52,801	61,440	62,571
Denominator	64,636	42,825	55,084	63,630	64,661
Data Source					Early Hearing Detection and Intervention Database
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
If you cannot report the numerator because of the reasons above, explain in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	98	98	99	99	99
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is still provisional.

2. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is based on entire year.

3. **Section Number:** Form11\_Performance Measure #12

**Field Name:** PM12

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is based on entire year, but not all occurrent birhts are represented due to problems with the EBC server failure following Hurricanes Katrina and Rita.

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	11	13	7	9	9
Annual Indicator	8.2	9.9	16.7	10.6	10.6
Numerator	99,977	111,448	189,258	123,425	123,425
Denominator	1,214,001	1,121,605	1,130,575	1,167,153	1,167,153
Data Source					Louisiana Medicaid/SCHIP Program
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	8	8	8	8	8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Data is provisional and based upon the 2007 data.
- Section Number:** Form11\_Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data is provisional and based upon the 2006 data.
- Section Number:** Form11\_Performance Measure #13  
**Field Name:** PM13  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Estimates are from the AAP, Children's Health Insurance Status Medicaid/SCHIP Eligibility and Enrollment Report September 2007. Data is final.

**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective			12.5	12	11.5
Annual Indicator		13.2		13.8	13.8
Numerator		11,781			
Denominator		89,373			
Data Source					CDC PedNSS

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	11	10.5	10.5	10.5	10.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is provisional and based upon the 2007 data.

2. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The WIC Program's application developer has been working with CDC on the criteria required for data transfer to PedNSS. The developer was able to transfer the WIC 2007 BMI data to be included in the 2007 CDC PedNSS report. Due to budget constraints and the upcoming changes in the WIC food package, 2008 data has not been transferred to PedNSS at this time. It is our hope that in the future the WIC Program's data system will be updated to automatically generate reports to be submitted to PedNSS.

3. **Section Number:** Form11\_Performance Measure #14

**Field Name:** PM14

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

In May of 2006, the WIC Program implemented a new data system. Due to this major change, data cannot be transferred to the CDC Pediatric Nutrition Surveillance System as done in the past. Therefore, no data can be reported this year.

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			13.8	13.5	13.5
Annual Indicator		17.7	17.7	16.6	16.6
Numerator		11,117	11,117	11,069	11,069
Denominator		62,767	62,767	66,686	66,686
Data Source					LA Pregnancy Risk Assessment Monitoring System
Do not report the numerator because there were fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	12.5	13.5	13.5	13.5	13.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #15  
**Field Name:** PM15  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Data is provisional and based upon the 2007 data.
- Section Number:** Form11\_Performance Measure #15  
**Field Name:** PM15  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data is provisional and based upon 2006 PRAMS data.
- Section Number:** Form11\_Performance Measure #15  
**Field Name:** PM15  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Data is provisional and based upon 2004 final PRAMS data.

**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	7.6	8.8	9.3	8.8	8.8
Annual Indicator	9.6	12.0	5.6	7.7	7.7
Numerator	33	41	18	25	25
Denominator	343,717	342,664	322,799	323,073	323,073
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>8.8</u>	<u>8.8</u>	<u>8.8</u>	<u>8.8</u>	<u>8.8</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is provisional and based upon the 2007.

**2. Section Number:** Form11\_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is provisional.

**3. Section Number:** Form11\_Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data is final.



**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	85.2	84.7	84.8	90	90
Annual Indicator	86.0	86.8	88.4	87.7	87.7
Numerator	1,146	1,153	1,194	1,243	1,243
Denominator	1,333	1,328	1,350	1,417	1,417
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	90	90	90	90	90
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Data is provisional and based upon the 2007 data.
- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data is provisional.
- Section Number:** Form11\_Performance Measure #17  
**Field Name:** PM17  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Data is final. Calculation of the percent of VLBW births born in Level III facilities requires an accurate list of hospitals with corresponding neonatal facility level codes. This list must be updated periodically as facility levels may change over time.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	84.5	85	86	87	88
Annual Indicator	85.5	87.1	87.1	86.9	86.9
Numerator	55,383	52,290	54,696	56,846	56,846
Denominator	64,770	60,058	62,820	65,438	65,438
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	89	90	91	91	91
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

- Section Number:** Form11\_Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 Data is provisional and based upon the 2007.
- Section Number:** Form11\_Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 Data is provisional.
- Section Number:** Form11\_Performance Measure #18  
**Field Name:** PM18  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Data is final

**STATE PERFORMANCE MEASURE # 1**

Percent of all children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services.

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6.9	6.9	7.1	7.3	7.5
Annual Indicator	7.0	6.7	7.4	7.3	8.1
Numerator	49,464	46,868	45,305	49,454	56,192
Denominator	704,129	700,534	612,468	681,753	690,340
Data Source					Adolescent School Health Initiative Annual Report
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	7.7	8	8	8.3	8.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 2**

Percent of women in need of family planning services who have received such services.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	23.5	24	24.5	25	24.5
Annual Indicator	25.4	20.4	17.7	18.8	19.1
Numerator	77,228	62,142	53,975	57,124	58,158
Denominator	304,270	304,270	304,270	304,270	304,270
Data Source					Louisiana Family Planning Program
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	<u>25</u>	<u>25.5</u>	<u>26</u>	<u>26.5</u>	<u>27</u>
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is for the calendar year.

**2. Section Number:** Form11\_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is for the calendar year.

**3. Section Number:** Form11\_State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data is for the calendar year.

**STATE PERFORMANCE MEASURE # 3**

Rate of children (per 1,000) under 18 who have been abused or neglected.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	7.7	7.6	8.7	9	9
Annual Indicator	9.3	9.2	9.9	9.6	8.4
Numerator	10,832	10,815	10,525	10,360	9,276
Denominator	1,169,276	1,169,276	1,066,952	1,079,560	1,107,973
Data Source					LA Department of Social Services
Is the Data Provisional or Final?				Final	Final
<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	8.3	8.2	8.1	8	7.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2008**Field Note:**

Numerator is based on Office of Community Services reports of unduplicated number of children 17 years of age and younger who experienced abuse and neglect, CY 2008. Denominator is the number of children in Louisiana ages 0-17 years, using July 2008 census data.

**2. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2007**Field Note:**

Numerator is based on Office of Community Services reports of unduplicated number of children 17 years of age and younger who experienced abuse and neglect, CY 2007. Denominator is the number of children in Louisiana ages 0-17 years, using July 200 7 census data.

**3. Section Number:** Form11\_State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2006**Field Note:**

Numerator is based on Office of Community Services reports of unduplicated number of children 17 years of age and younger who experienced abuse and neglect, CY 2006. Denominator is the number of children in Louisiana ages 0-17 years, using July 2005 census data.

**STATE PERFORMANCE MEASURE # 4**

Percent of CSHS patients with case management (follow-up visits) from a nurse, social worker, or nutritionist.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	55	57	64	66	85
Annual Indicator	51.5	62.8	81.6	72.6	78.6
Numerator	2,760	3,287	3,965	3,370	3,473
Denominator	5,363	5,236	4,858	4,645	4,421
Data Source					Louisiana CSHS Program
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	85	85	85	85	85
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

None

**STATE PERFORMANCE MEASURE # 7**

Percent of women who use alcohol during pregnancy.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			2.8	5	5
Annual Indicator	2.9	6.8	6.8	8.9	8.9
Numerator	1,811	4,258	4,258	5,935	5,935
Denominator	62,014	62,405	62,405	66,686	66,686
Data Source					LA Pregnancy Risk Assessment Monitoring System
Is the Data Provisional or Final?				Provisional	Provisional

Annual Objective and Performance Data					
	2009	2010	2011	2012	2013
Annual Performance Objective	6.7	5	5	5	5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is provisional and based upon the 2007 data.

**2. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is provisional and is based upon the 2004 PRAMS data.

**3. Section Number:** Form11\_State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data is based upon the 2004 PRAMS data.

**STATE PERFORMANCE MEASURE # 8**

Rate of infant deaths due to Sudden Infant Death Syndrome.

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	0.8	1.1	1.1	1	1
Annual Indicator	0.8	1.3	0.9	1.3	1.3
Numerator	51	77	54	83	83
Denominator	64,956	60,531	62,416	65,656	65,656
Data Source					Louisiana Vital Records and Statistics
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	0.8	0.8	0.8	0.8	0.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2008**Field Note:**

Data is provisional and is based upon 2007. Vital Statistics Data is used this year.

**2. Section Number:** Form11\_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2007**Field Note:**

Data is provisional. Vital Statistics Data is used this year.

**3. Section Number:** Form11\_State Performance Measure #8**Field Name:** SM8**Row Name:****Column Name:****Year:** 2006**Field Note:**

Data is provisional. Vital Statistics Data is used this year. SIDS Program Data is not available at this time.



**STATE PERFORMANCE MEASURE # 9**

Percent of state fetal and infant deaths reviewed by a Feto-Infant Mortality Review (FIMR).

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective			7.5	15	20
Annual Indicator	7.7	11.7			
Numerator	66	78	132	164	189
Denominator	857	666			
Data Source					Louisiana Vital Records and Statistics
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	30	50	50	50	50
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2008**Field Note:**

2006-2007 data on number of fetal and infant deaths is not available from Louisiana Vital Statistics at the time.

**2. Section Number:** Form11\_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2007**Field Note:**

2006 -2007 data on number of fetal and infant deaths is not available from Louisiana Vital Statistics at the time.

**3. Section Number:** Form11\_State Performance Measure #9**Field Name:** SM9**Row Name:****Column Name:****Year:** 2006**Field Note:**

2006 data on number of fetal and infant deaths is not available from Louisiana Vital Statistics at the time.

**STATE PERFORMANCE MEASURE # 10**

Percent of licensed day care centers with a health consultant contact.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	55	35	39	40	95
Annual Indicator	31.0	38.4	32.4	85.4	100.0
Numerator	673	833	565	1,490	1,753
Denominator	2,170	2,170	1,744	1,744	1,753
Data Source					LA Department of Social Services
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	98	99	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2008**Field Note:**

FY08 data is based on data from the Louisiana Department of Social Services (DSS), Bureau of Licensing.

**2. Section Number:** Form11\_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2007**Field Note:**

FY07 data is based on a report provided by the Louisiana DHH Center for Environmental Services. The report documents the number of child care facilities that met the DHH Center for Environmental Services requirements for licensure during the Block Grant FY. Child care staff is required by DHH to have three hours of health and safety training provided by Child Care Health Consultants (CCHC). Parish Sanitarians inspect centers for proof of the three hours of health and safety training provided by a CCHC and for other requirements to ensure a safe environment. Louisiana DHH Center for Environmental Services compiles a database of the centers that pass this inspection and are recommended for licensure.

**3. Section Number:** Form11\_State Performance Measure #10**Field Name:** SM10**Row Name:****Column Name:****Year:** 2006**Field Note:**

FY 2006 data is based on the Child Care Health Consultant monthly report system.

**STATE PERFORMANCE MEASURE # 11**

Percent of Louisiana resident women giving birth who undergo screening for substance use, depression, and domestic violence using the SBIRT-HBE approved methods.

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective					
Annual Indicator					6.4
Numerator					4,271
Denominator					66,686
Data Source					Louisiana Vital Records and Statistics
Is the Data Provisional or Final?					Provisional

	<u>Annual Objective and Performance Data</u>				
	2009	2010	2011	2012	2013
Annual Performance Objective	8	9	11	13	15
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Form11\_State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2007**Field Note:**

The performance measure was newly added in 2009.

**2. Section Number:** Form11\_State Performance Measure #11**Field Name:** SM11**Row Name:****Column Name:****Year:** 2006**Field Note:**

Teh performance measure was newly added fin 2009.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]  
**STATE: LA**

**Form Level Notes for Form 12**

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

Annual Objective and Performance Data

	2004	2005	2006	2007	2008
Annual Performance Objective	9	8.8	8.6	9.4	9.6
Annual Indicator	10.4	10.0	10.0	8.9	8.9
Numerator	678	596	633	585	585
Denominator	64,956	59,446	63,187	65,656	65,656
Data Source					Louisiana Vital Records and Statistics

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Provisional

Provisional

Annual Objective and Performance Data

	2009	2010	2011	2012	2013
Annual Performance Objective	9.4	9.4	9.4	9.4	9.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Form12\_Outcome Measure 1  
**Field Name:** OM01  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 Data is final.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	1.8	1.8	1.8	1.8	1.8
Annual Indicator	1.9	2.1	2.5	2.2	2.2
Numerator	14.7	14.9	16	13.7	13.7
Denominator	7.7	7	6.4	6.1	6.1

Data Source

Louisiana Vital  
Records and  
Statistics

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	1.8	1.8	1.8	1.8	1.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

None

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

Annual Objective and Performance Data					
	2004	2005	2006	2007	2008
Annual Performance Objective	6	5.9	5.8	5.7	5.6
Annual Indicator	6.3	5.8	6.2	5.1	5.1
Numerator	408	343	389	335	335
Denominator	64,956	59,446	63,187	65,656	65,656
Data Source					Louisiana Vital Records and Statistics
Do not report the numerator because there are fewer than 5 events over the last year, and the number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2009	2010	2011	2012	2013
Annual Performance Objective	5.6	5.6	5.6	5.5	5.5
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

None

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	3	2.9	2.8	4.1	4
Annual Indicator	4.2	4.3	3.9	3.8	3.8
Numerator	270	253	244	250	250
Denominator	64,956	59,446	63,187	65,656	65,656

Data Source

Louisiana Vital  
Records and  
Statistics

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	3.8	3.8	3.8	3.7	3.7
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

**Field Level Notes**

None

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	12	11.8	7.5	7.2	7
Annual Indicator	7.9	6.9	7.4	6.1	6.1
Numerator	516	411	470	400	400
Denominator	65,160	59,595	63,344	65,800	65,800

Data Source

Louisiana Vital  
Records and  
Statistics

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	7	7	6.8	6.3	6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

None



**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

**Annual Objective and Performance Data**

	2004	2005	2006	2007	2008
Annual Performance Objective	30	29.5	28.5	28	27.5
Annual Indicator	33.4	29.7	25.5	27.6	27.6
Numerator	300	267	213	228	228
Denominator	898,248	898,850	835,172	827,369	827,369

Data Source

Louisiana Vital  
Records and  
Statistics

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Annual Objective and Performance Data**

	2009	2010	2011	2012	2013
Annual Performance Objective	27.5	27	27	22	22
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are  
 not required for future year data.

**Field Level Notes**

None

**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: LA**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

**Total Score:** 17

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

## FORM NOTES FOR FORM 13

None

### FIELD LEVEL NOTES

1. **Section Number:** Form13\_Main  
**Field Name:** Question1  
**Row Name:** #1. Family members participate on advisory committee or task forces...  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
All 9 CSHS Parent Liaisons have the opportunity to serve on various community/ regional task forces. All receive 16 hours of training each year and are paid for their time and reimbursed for training expenses.
2. **Section Number:** Form13\_Main  
**Field Name:** Question2  
**Row Name:** #2. Financial support (...) is offered for parent activities or parent groups.  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Most of the contracting agencies employing parent liaisons receive small stipends to help offset family costs to participate in activities in addition to the compensation for parents' time. However, more is always needed in the agencies that offer stipends for things such as child care, or to offset fuel cost.
3. **Section Number:** Form13\_Main  
**Field Name:** Question3  
**Row Name:** #3. Family members are involved in the Children with Special Health Care Needs...  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
MCH Block Grant information is sent to parent liaisons, who in turn send it to parents in each region asking for feedback which is reported in the public input section. Statewide parent consultants also participate in the grant writing (such as this section).
4. **Section Number:** Form13\_Main  
**Field Name:** Question4  
**Row Name:** #4. Family members are involved in service training of CSHCN staff and providers.  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Family members are incorporated into every aspect of CSHS activities, including training. A parent liaison has been actively involved in care coordination. Parent liaisons participated in the CSHS Manual Revision Workgroup Meeting.
5. **Section Number:** Form13\_Main  
**Field Name:** Question5  
**Row Name:** #5. Family members hired as paid staff or consultants to the State CSHCN program...  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
There are three full time statewide parent consultants that participate in CSHS programs: two in CSHS clinics and one with the Hearing, Speech and Vision Program. CSHS provides training for the 13 PL.
6. **Section Number:** Form13\_Main  
**Field Name:** Question6  
**Row Name:** #6. Family members of diverse cultures are involved in all of the above activities  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Louisiana is a culturally diverse state, and parent liaisons reflect this. Regional differences must continually be taken into consideration in the implementation of programs.

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

[Sec. 505(a)(5)]

**STATE: LA FY: 2010**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Decrease infant mortality and morbidity in collaboration with regional coalitions comprised of public and private health and social service providers.
2. Decrease intentional and unintentional injuries in the maternal, child, adolescent, and children with special health care needs populations.
3. Assure access to quality health care for the maternal, child, adolescent, and children with special health care needs populations, addressing barriers including Medicaid provider availability and lack of transportation.
4. Address the mental health needs of the maternal, child, adolescent, and children with special health care needs populations, through prevention and early intervention, screening, referral, and where appropriate, treatment.
5. Address the substance abuse related needs of the maternal and adolescent population, through prevention and early intervention, screening, and referral.
6. Promote comprehensive systems of care and seamless transition to adult services for the children with special health care needs population by providing care coordination.
7. Promote pre-conceptional and inter-conceptional health care including family planning.
8. Address the oral health needs of the maternal, child, adolescent, and children with special health care needs populations.
9. Improve the health of the maternal, child, adolescent, and children with special health care needs populations, addressing healthy nutrition, proper prenatal weight gain, breastfeeding, and physical activity.
10. Obtain and utilize reliable evidence to: a) identify preventable causes of maternal, child and adolescent mortality and morbidity; b) develop preventive public health campaigns targeting high risk populations; and c) perform process and outcome evaluation.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: LA

APPLICATION YEAR: 2010

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>State Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>9</u>	Obtain technical assistance in developing a strategic plan and needs assessment for the LA FIMR network. Louisiana has FIMR teams in all 9 regions.	An experienced, professional facilitator will be contracted to conduct a 1-2 day session.	Bill Phillips
2.	<b>State Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>11</u>	LA has a statewide screening program for substance and alcohol use by pregnant women. Technical assistance to conduct a statewide FAS / FASD prevention strategic plan with all SBIRT-HBI partners.	An experienced, professional facilitator will be contracted to conduct a 1-2 day session.	Bill Phillips
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

	measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None



**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: LA**

SP # 1

**PERFORMANCE MEASURE:**

Percent of all children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services.

**STATUS:**

Active

**GOAL**

To offer access to comprehensive preventive and primary health services, including mental health services, to children and adolescents enrolled in public schools in Louisiana.

**DEFINITION**

Number of children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services / Number of children and adolescents enrolled in Louisiana public schools

**Numerator:**

Number of children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services

**Denominator:**

Number of children and adolescents enrolled in Louisiana public schools

**Units:** 100 **Text:** 1

**HEALTHY PEOPLE 2010 OBJECTIVE**

21.2 Receipt of recommended services

Increase to at least 50% the proportion of adolescents, and to at least 80% the proportion of children age 2-12, who have received, as a minimum within the appropriate interval, all of the screening and immunization services and at least one of the counseling services appropriate for their age.

**DATA SOURCES AND DATA ISSUES**

Adolescent School Health Initiative Annual Services Report. Louisiana Department of Education. Increasing the percent of all children and adolescents enrolled in public schools in Louisiana that have access to school-based health center services will depend on substantial financial support for school-based health centers.

**SIGNIFICANCE**

According to the 1996 Annie Casey Foundation Kids Count Data Book, Louisiana ranks last in the nation for the manner in which it provides health and quality care for its children. School-based health centers provide convenient access to primary and preventive care for children and adolescents who might otherwise have limited or no access to health care.

SP # 2

**PERFORMANCE MEASURE:**

Percent of women in need of family planning services who have received such services.

**STATUS:**

Active

**GOAL**

To increase the percent of women in need of family planning services who have received such services through publicly supported clinics.

**DEFINITION**

The number of women in need of family planning services who have received such services from a publicly supported clinic in a calendar year. The number of women in need of family planning services in a calendar year.

**Numerator:**

The number of women in need of family planning services who have received such services from a publicly supported clinic in a calendar year.

**Denominator:**

The number of women in need of family planning services in a calendar year.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

5.2 Unintended pregnancy

Reduce to no more than 30% the proportion of all pregnancies that are unintended.

**DATA SOURCES AND DATA ISSUES**

Family planning program data. The Alan Guttmacher Institute report on Contraceptive Needs and Services estimates the need for publicly funded services for women between the ages of 13 and 44 years who are sexually active, and are neither intentionally pregnant nor trying to become pregnant.

**SIGNIFICANCE**

In the United States, only half of pregnancies are planned at the time of conception. For some of these unplanned pregnancies, the women wanted to get pregnant later; for others, the women wanted no more children at all. About half of unplanned pregnancies are also associated with more problems for the mother and infant than planned pregnancies. Women with unplanned pregnancies cannot take advantage of preconception care, a special health care visit that helps women achieve the healthiest possible pregnancy outcome. Planning to become pregnant at a time when a woman is healthy and ready to become a parent can maximize the health and opportunities for women, children, and families, and can reduce abortions.

SP # 3

**PERFORMANCE MEASURE:**

Rate of children (per 1,000) under 18 who have been abused or neglected.

**STATUS:**

Active

**GOAL**

To prevent child abuse and neglect.

**DEFINITION**

# of validated cases of child abuse and neglect to children under age 18 in Louisiana / Total population under age 18 in Louisiana

**Numerator:**

Number of validated cases of child abuse and neglect to children under age 18 in Louisiana

**Denominator:**

Total population under 18 in Louisiana

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

7.4 Child abuse and neglect

Reverse to less than 25.2 per 1000 children the rising incidence of maltreatment of children younger than age 18. (Baseline 25.2 per 1000 in 1986)

**DATA SOURCES AND DATA ISSUES**

Numerator is from State of Louisiana, Department of Social Services, Office of Community Services. Valid cases, as defined by OCS, mean that a review of the facts showed a reason to believe abuse had taken place. Denominator is from U.S. Bureau of the Census population estimates. The number of reported cases of child abuse and neglect is much higher than the validated cases. For instance, for fiscal year 1996 the numbers were 45,981 reported cases vs. 14,863 validated cases. It is difficult to project five year goals for this measure, since as awareness of child abuse and neglect is heightened, numbers of reported and validated cases may actually increase.

**SIGNIFICANCE**

Children who witness or are victims of violence at home display emotional and behavioral disturbance as diverse as withdrawal, low self-esteem, nightmares, self-blame, and aggression against peers, family members and/or property. A comparison of delinquent and nondelinquent youth found that a history of family violence or abuse is the most significant difference between the two groups.

SP # 4

**PERFORMANCE MEASURE:**

Percent of CSHS patients with case management (follow-up visits) from a nurse, social worker, or nutritionist.

**STATUS:**

Active

**GOAL**

To ensure that a coordinated continuum of appropriate services exist for the care of children with potential or actual chronic and disabling conditions and their families.

**DEFINITION**

Unduplicated count of CSHS patients with a follow-up visit / Unduplicated count of CSHS patients

**Numerator:**

Unduplicated count of CSHS patients with a follow-up visit

**Denominator:**

Unduplicated count of CSHS patients

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

17.2 Disability due to chronic conditions

Reduce to no more than 8% the proportion of people who experience a limitation in major activity due to chronic conditions.

**DATA SOURCES AND DATA ISSUES**

A new Ph-9 form collecting more accurate information on follow-up visits for CSHS patients has just been implemented in three regions, and all regions will eventually adopt the new form. In five years, it is expected that 60% of CSHS patients will have received case management services, since Louisiana's CSHS program is placing increasing emphasis on a more holistic approach. The program envisions increased case management for its children, and a shift away from simple direct medical intervention.

**SIGNIFICANCE**

The establishment of systems of services that reflect the principles of comprehensive, community-based, coordinated, family-centered care are essential for effectively fostering and facilitating activities to (1) reverse or slow the progress of chronic and disabling conditions among children; (2) minimize the complications and impact of chronic disabling conditions among children; (3) strengthen the ability of families to care for children with actual or potential chronic and disabling conditions; and (4) enable children with more serious conditions to remain in the home and community-based living arrangements, rather than in institutional settings.

SP # 7

**PERFORMANCE MEASURE:**

Percent of women who use alcohol during pregnancy.

**STATUS:**

Active

**GOAL**

To reduce alcohol use during pregnancy.

**DEFINITION**

# of women surveyed who report they have used alcohol during the last 3 months of their most recent pregnancy / # of women surveyed

**Numerator:**

# of women surveyed who report they have used alcohol during the last 3 months of their most recent pregnancy

**Denominator:**

# of women surveyed

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

14.10 Alcohol, tobacco, and drug use during pregnancy

Increase abstinence from tobacco use by pregnant women to at least 90%, increase abstinence from alcohol by pregnant women to at least 90%, and increase abstinence from cocaine and marijuana by pregnant women to at least 90%.

**DATA SOURCES AND DATA ISSUES**

Initially, the data was taken from birth certificate data, which resulted in a low estimate due to the known limitations of birth certificate data. Data from LaPRAMS, Louisiana's Pregnancy Risk Assessment Monitoring System, is now used and is a more accurate data source for this measure.

**SIGNIFICANCE**

Substance use during pregnancy contributes significantly to the number of low birth weight babies and the infant mortality and morbidity rates in Louisiana.

SP # 8

**PERFORMANCE MEASURE:**

Rate of infant deaths due to Sudden Infant Death Syndrome.

**STATUS:**

Active

**GOAL**

To decrease the rate of infant deaths due to Sudden Infant Death.

**DEFINITION**

Number of infant deaths due to SIDS in a calendar year/ Number of live births

**Numerator:**

Number of infant deaths due to SIDS in a calendar year

**Denominator:**

Number of live births

**Units:** 1000 **Text:** Rate

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-1: Reduce Fetal and Infant Deaths

**DATA SOURCES AND DATA ISSUES**

SIDS Program Data(numerator), Vital Statistics Mortality Data (denominator)

**SIGNIFICANCE**

SIDS is the number one cause of unexpected infant death. SIDS is the most common cause of death in the post-neonatal period. The U.S. SIDS rate has declined almost 50% since the initiation of the "Back to Sleep Campaign" in 1994. However, there is still significant racial disparity. Rates are much higher in lower social economic status (SES) groups across all populations.

SP # 9

**PERFORMANCE MEASURE:**

Percent of state fetal and infant deaths reviewed by a Feto-Infant Mortality Review (FIMR).

**STATUS:**

Active

**GOAL**

To monitor and evaluate the progress of the Louisiana FIMR Network by measuring the percent of fetal and infant deaths to Louisiana residents that are reviewed by these programs. The goal is to have FIMR case reviews for 20% of the fetal and infant deaths in Louisiana within the next five years (2011).

**DEFINITION**

The percent of fetal and infant deaths with a birth weight greater than 500gms and/or gestational age larger than 24 weeks, born to Louisiana residents, that are reviewed by a Louisiana FIMR program.

**Numerator:**

The number of fetal and infant deaths of Louisiana residents weighing 500 or more grams and/or 24 or more weeks gestation, as determined by Louisiana Vital Records, that are reviewed by a Louisiana FIMR program in a calendar year.

**Denominator:**

The number of fetal and infant deaths of Louisiana residents weighing 500 or more grams and/or 24 or more weeks gestation in a calendar year, as determined by Louisiana Vital Records.

**Units:** 100    **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

16-1: Reduce Fetal and Infant Deaths

**DATA SOURCES AND DATA ISSUES**

Each of the 9 regions in Louisiana has a FIMR program whose coordinator is responsible for reporting the number of cases reviewed at each meeting. Vital Records birth and death data, the denominator for this measure, is not typically available until the following summer after each calendar year. Therefore, calculation of this measure will use the latest available vital records data.

**SIGNIFICANCE**

Through this process of case identification, data abstraction, and case review, FIMR programs will assure further enhanced understanding of the circumstances surrounding fetal and infant deaths in Louisiana. Quantitatively monitoring a qualitative program helps to bring together data and program specialists for improved outcomes.

**PERFORMANCE MEASURE:**

Percent of licensed day care centers with a health consultant contact.

**STATUS:**

Active

**GOAL**

To improve the health and safety of child care settings by providing support, guidance, and technical assistance to local child care providers, social service agencies, and families.

**DEFINITION**

The number of licensed day care centers in Louisiana with a health consultant contact / The number of licensed day care centers in Louisiana

**Numerator:**

The number of licensed day care centers in Louisiana with a health consultant contact

**Denominator:**

The number of licensed day care centers in Louisiana

**Units:** 100 **Text:** Percent**HEALTHY PEOPLE 2010 OBJECTIVE**

20.8 Diarrhea among children in child care centers

Reduce infectious diarrhea by at least 25% among children in licensed child care centers.

10.14 Service and protection

Establish in 50 states either public or labor department programs that provide consultation and assistance to small businesses to implement safety and health programs for their employees.

**DATA SOURCES AND DATA ISSUES**

This program has just begun -- health consultants have been trained and Resource and Referral sites have been established statewide. Data for this measure was initially taken from a November, 1996, needs assessment of LA Child Care Centers. Data is now collected from communications with the health consultants themselves.

**SIGNIFICANCE**

Basic concepts of health and safety need to be a part of training for all child care providers. Children cared for in group settings are more likely to be exposed to communicable diseases and may be exposed to more risk for injury. These children must depend on the caregiver for proper nutrition and food served in a safe and sanitary manner. National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs, developed by the American Academy of Pediatrics and the American Public Health Association, offers standards for the major health and safety issues in child care. Recommendation 55: We recommend that each community should have access to an identified child health consultant who can provide consultations and technical assistance on health issues to facilities.



SP # 11

**PERFORMANCE MEASURE:**

Percent of Louisiana resident women giving birth who undergo screening for substance use, depression, and domestic violence using the SBIRT-HBE approved methods.

**STATUS:**

Active

**GOAL**

To provide a screening system to detect pregnant women at risk for substance use, depression and domestic violence, refer for prevention and early intervention services and to provide data to document the need for services to address this problem.

**DEFINITION**

Percent of Louisiana resident women giving birth who undergo screening for substance use, depression, and domestic violence using the SBIRT-HBE approved methods.

**Numerator:**

Number of women who undergo at least one screen during pregnancy.

**Denominator:**

Number of Louisiana resident women giving birth within the year.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

18-6

(Developmental) Increase the number of persons seen in primary health care who receive mental health screening and assessment.

**DATA SOURCES AND DATA ISSUES**

Numerator is the number of Louisiana pregnant women who are screened through SBIRT-HBI approved methods  
Denominator is number of Louisiana resident women giving birth within the year. Data source for numerator is actual number of screens performed. Denominator is vital records for deliveries.

**SIGNIFICANCE**

Risk screening will be prioritized to pregnant women in order to provide opportunities for intervention before the child is born. Identifying such women at the prenatal level, with referral for appropriate services, will promote greater awareness of problems such as substance use, maternal depression and the effects of domestic violence on children, and opportunities for preventive or intervention services for such families.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: LA**

**Form Level Notes for Form 17**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>74.4</u>	<u>60.3</u>	<u>57.1</u>	<u>55.3</u>	<u>55.3</u>
<b>Numerator</b>	<u>2,388</u>	<u>1,817</u>	<u>1,722</u>	<u>1,650</u>	<u>1,650</u>
<b>Denominator</b>	<u>320,790</u>	<u>301,375</u>	<u>301,375</u>	<u>298,157</u>	<u>298,157</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Provisional

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is preliminary and based upon 2007 data.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is based upon 2005 Louisiana Hospital Inpatient Discharge Data (LAHIDD). Data is provisional, based on 2005. Since 2002, the primary data source of analysis and reporting for this indicator is the Louisiana Hospital Inpatient Discharge Data (LAHIDD). LAHIDD is compiled by the Health Statistics Department of the Louisiana Office of Public Health, and EMS/Injury Research and Prevention Program analyzes the data needed for this indicator.

Since participation in reporting hospital inpatient discharge data is not mandatory in Louisiana, then differences in the number, size, and type of hospitals reporting annually will affect our data reported. The variability limits year-to-year comparison analyses. Also, since the CDC has changed the 2004 Census population data for Louisiana from 4,515,770 to 4,506,685, then the 2004 statistics reported are based on the new population data.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is based upon 2006 Louisiana Hospital Inpatient Discharge Data (LAHIDD). Data is final. Since 2002, the primary data source of analysis and reporting for this indicator is the Louisiana Hospital Inpatient Discharge Data (LAHIDD). LAHIDD is compiled by the Health Statistics Department of the Louisiana Office of Public Health, and EMS/Injury Research and Prevention Program analyzes the data needed for this indicator.

Since participation in reporting hospital inpatient discharge data is not mandatory in Louisiana, then differences in the number, size, and type of hospitals reporting annually will affect our data reported. The variability limits year-to-year comparison analyses. Also, since the CDC has changed the 2004 Census population data for Louisiana from 4,515,770 to 4,506,685, then the 2004 statistics reported are based on the new population data.

**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>88.7</u>	<u>87.5</u>	<u>89.8</u>	<u>90.2</u>	<u>89.9</u>
<b>Numerator</b>	<u>40,591</u>	<u>40,441</u>	<u>40,505</u>	<u>43,931</u>	<u>43,757</u>
<b>Denominator</b>	<u>45,770</u>	<u>46,225</u>	<u>45,119</u>	<u>48,707</u>	<u>48,699</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416, for dates of service 10/01/2007 - 09/30/2008. Since Louisiana's SCHIP program is through Medicaid expansion, the numerator and denominator include children enrolled in LaCHIP.

2. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416, for dates of service 10/01/2006 - 09/30/2007. Since Louisiana's SCHIP program is through Medicaid expansion, the numerator and denominator include children enrolled in LaCHIP.

3. **Section Number:** Form17\_Health Systems Capacity Indicator #02

**Field Name:** HSC02

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416, for dates of service 10/01/2005 - 09/30/2006. Since Louisiana's SCHIP program is through Medicaid expansion, the numerator and denominator include children enrolled in LaCHIP.

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>86.4</u>	<u>86.4</u>	<u>53.6</u>	<u>89.3</u>	<u>91.3</u>
<b>Numerator</b>	<u>515</u>	<u>459</u>	<u>260</u>	<u>509</u>	<u>496</u>
<b>Denominator</b>	<u>596</u>	<u>531</u>	<u>485</u>	<u>570</u>	<u>543</u>

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
Data is provided by the Medicaid Office.
- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is provided by the Medicaid Office.
- Section Number:** Form17\_Health Systems Capacity Indicator #03  
**Field Name:** HSC03  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
Data is provided by the Medicaid Office.

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>90.3</u>	<u>89.7</u>	<u>90.0</u>	<u>90.0</u>	<u>90.0</u>
<b>Numerator</b>	<u>58,460</u>	<u>53,901</u>	<u>56,593</u>	<u>58,881</u>	<u>58,881</u>
<b>Denominator</b>	<u>64,769</u>	<u>60,109</u>	<u>62,870</u>	<u>65,449</u>	<u>65,449</u>
<b>Check this box if you cannot report the numerator because</b>					
<b>1. There are fewer than 5 events over the last year, and</b>					
<b>2. The average number of events over the last 3 years is fewer</b>					
<b>than 5 and therefore a 3-year moving average cannot be</b>					
<b>applied.</b>					
<i>(Explain data in a year note. See Guidance, Appendix IX.)</i>					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Field Level Notes**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	92.3	92.3	83.2	85.5	89.9
Numerator	642,442	666,584	636,648	645,924	663,982
Denominator	696,077	721,919	764,825	755,539	738,184

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2008**Field Note:**

For 2008, data was obtained from the Louisiana Department of Health and Hospitals Medicaid Annual Reports for Federal Fiscal Year 2007/2008. The numerator is the (unduplicated) number of all Medicaid children (Title XIX and XXI) under age 19 years who received at least one processed claim during the period involved, whether or not he/she was enrolled on the date the claim was paid but was enrolled at the time the service for the claim was provided. The denominator is the number of all children who applied and have been approved to receive services, regardless of whether he/she received services and/or any claims have been filed on his/her behalf. Therefore, any post-annual report data of all Medicaid children's enrollment, recipients of service(s), and/or total costs of received services received for a specific state fiscal year, which is obtained after the date of the data used for the Medicaid report, will differ from the data in the report because retroactive eligibility will be included in the new figures.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2007**Field Note:**

For 2006 and 2007, data was obtained from the Louisiana Department of Health and Hospitals Medicaid Annual Reports for State Fiscal Year 2005/2006 and 2006/2007. The numerator is the (unduplicated) number of all Medicaid children (Title XIX and XXI) under age 19 years who received at least one processed claim during the period involved, whether or not he/she was enrolled on the date the claim was paid but was enrolled at the time the service for the claim was provided. The denominator is the number of all children who applied and have been approved to receive services, regardless of whether he/she received services and/or any claims have been filed on his/her behalf. Therefore, any post-annual report data of all Medicaid children's enrollment, recipients of service(s), and/or total costs of received services received for a specific state fiscal year, which is obtained after the date of the data used for the Medicaid report, will differ from the data in the report because retroactive eligibility will be included in the new figures.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2006**Field Note:**

For 2006 and 2007, data was obtained from the Louisiana Department of Health and Hospitals Medicaid Annual Reports for State Fiscal Year 2005/2006 and 2006/2007. The numerator is the (unduplicated) number of all Medicaid children (Title XIX and XXI) under age 19 years who received at least one processed claim during the period involved, whether or not he/she was enrolled on the date the claim was paid but was enrolled at the time the service for the claim was provided. The denominator is the number of all children who applied and have been approved to receive services, regardless of whether he/she received services and/or any claims have been filed on his/her behalf. Therefore, any post-annual report data of all Medicaid children's enrollment, recipients of service(s), and/or total costs of received services received for a specific state fiscal year, which is obtained after the date of the data used for the Medicaid report, will differ from the data in the report because retroactive eligibility will be included in the new figures.

**HEALTH SYSTEMS CAPACITY MEASURE # 07B**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	<u>41.5</u>	<u>42.0</u>	<u>40.2</u>	<u>40.4</u>	<u>44.5</u>
<b>Numerator</b>	<u>59,417</u>	<u>62,777</u>	<u>58,224</u>	<u>62,241</u>	<u>66,807</u>
<b>Denominator</b>	<u>143,106</u>	<u>149,564</u>	<u>144,751</u>	<u>153,948</u>	<u>150,115</u>

Check this box if you cannot report the numerator because

1. There are fewer than 5 events over the last year, and

2. The average number of events over the last 3 years is fewer

than 5 and therefore a 3-year moving average cannot be

applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

**1. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416, for dates of service 10/01/2007 - 09/30/2008.

**2. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416, for dates of service 10/01/2006 - 09/30/2007.

**3. Section Number:** Form17\_Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

From Louisiana Medicaid Management Information Systems, HCFA 416 , for dates of service 10/01/2005 - 09/30/2006.



**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>4.6</u>	<u>8.4</u>	<u>5.6</u>	<u>4.3</u>	<u>3.7</u>
<b>Numerator</b>	<u>1,228</u>	<u>2,058</u>	<u>1,400</u>	<u>1,101</u>	<u>1,055</u>
<b>Denominator</b>	<u>26,671</u>	<u>24,448</u>	<u>25,036</u>	<u>25,541</u>	<u>28,385</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes**

1. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Source for 2008 numerator is Medicaid. The Denominator is from the Social Security Administration, Supplemental Security Record (Characteristic Extract Record format), 100 percent data. Table: "Number of children under age 16 receiving federally administered SSI payments, by state or other area, December 2008."

2. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Source for 2007 numerator is Medicaid. The Denominator is from the Social Security Administration, Supplemental Security Record (Characteristic Extract Record format), 100 percent data. Table: "Number of children under age 16 receiving federally administered SSI payments, by state or other area, December 2007."

3. **Section Number:** Form17\_Health Systems Capacity Indicator #08

**Field Name:** HSC08

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Source for 2006 numerator is Medicaid. The Denominator is from the Social Security Administration, Supplemental Security Record (Characteristic Extract Record format), 100 percent data. Table: "Number of children under age 16 receiving federally administered SSI payments, by state or other area, December 2006."

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #05**  
**(MEDICAID AND NON-MEDICAID COMPARISON)**  
**STATE: LA**

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2007	Matching data files	<u>12.7</u>	<u>8</u>	<u>11.2</u>
b) <i>Infant deaths per 1,000 live births</i>	2007	Matching data files	<u>10.7</u>	<u>5</u>	<u>8.9</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2007	Matching data files	<u>82.5</u>	<u>96.5</u>	<u>86.9</u>
d) <i>Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2007	Matching data files	<u>89.2</u>	<u>91.6</u>	<u>90</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: LA**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2008	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>5</u> ) (Age range <u>6</u> to <u>14</u> ) (Age range <u>    </u> to <u>    </u> )	2008	<u>200</u> <u>200</u> <u>    </u>
c) <i>Pregnant Women</i>	2008	<u>200</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: LA**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2008	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>19</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2008	<u>200</u> <u>    </u> <u>    </u>
c) <i>Pregnant Women</i>		<u>    </u>

## FORM NOTES FOR FORM 18

None

### FIELD LEVEL NOTES

1. **Section Number:** Form18\_Indicator 06 - SCHIP

**Field Name:** SCHIP\_Infant

**Row Name:** Infants

**Column Name:**

**Year:** 2010

**Field Note:**

Since April of 2008, families with incomes between 200 and 250 percent of FPL will be able to obtain health coverage at an affordable monthly premium and with co-payments through the new LaCHIP Affordable Plan.

For all children ages 0 through 19 years, the percent of poverty level for eligibility in Louisiana Medicaid and LaCHIP is up to 200% at no cost.

2. **Section Number:** Form18\_Indicator 06 - SCHIP

**Field Name:** SCHIP\_Children

**Row Name:** SCHIP Children

**Column Name:**

**Year:** 2010

**Field Note:**

Since April of 2008, families with incomes between 200 and 250 percent of FPL will be able to obtain health coverage at an affordable monthly premium and with co-payments through the new LaCHIP Affordable Plan.

For all children ages 0 through 19 years, the percent of poverty level for eligibility in Louisiana Medicaid and LaCHIP is up to 200% at no cost.

3. **Section Number:** Form18\_Indicator 06 - SCHIP

**Field Name:** SCHIP\_Women

**Row Name:** Pregnant Women

**Column Name:**

**Year:** 2010

**Field Note:**

Pregnant women are covered under the state's LaMOMS program. This program is a standard Medicaid program and is not covered by SCHIP funds.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: LA**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

<b>DATABASES OR SURVEYS</b>	<b>Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *</b>	<b>Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)</b>
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	1	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: LA**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	2	No
Other:		

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

<b>Notes:</b>
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19**

None

**FIELD LEVEL NOTES**

None

**FORM 20**  
**HEALTH STATUS INDICATORS #01-#05**  
**MULTI-YEAR DATA**  
**STATE: LA**

**Form Level Notes for Form 11**

None

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

	<u>Annual Indicator Data</u>				
	2004	2005	2006	2007	2008
Annual Indicator	11.0	11.5	11.4	11.2	11.2
Numerator	7,112	6,821	7,226	7,378	7,378
Denominator	64,949	59,442	63,184	65,656	65,656

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer  
 than 5 and therefore a 3-year moving average cannot be  
 applied.

*(Explain data in a year note. See Guidance, Appendix IX.)*

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 2008 data is provisional and is based upon 2007 data.
- Section Number:** Form20\_Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2007 data is provisional.
- Section Number:** Form20\_Health Status Indicator #01A  
**Field Name:** HSI01A  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 2006 data is final.



**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

		<b>Annual Indicator Data</b>			
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>9.1</u>	<u>9.5</u>	<u>9.5</u>	<u>9.3</u>	<u>9.3</u>
<b>Numerator</b>	<u>5,697</u>	<u>5,461</u>	<u>5,775</u>	<u>5,874</u>	<u>5,874</u>
<b>Denominator</b>	<u>62,803</u>	<u>57,476</u>	<u>61,068</u>	<u>63,384</u>	<u>63,384</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data is provisional and based upon 2007 data.

**2. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data is provisional.

**3. Section Number:** Form20\_Health Status Indicator #01B**Field Name:** HSI01B**Row Name:****Column Name:****Year:** 2006**Field Note:**

2006 data is final

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

		<b>Annual Indicator Data</b>			
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>2.1</u>	<u>2.3</u>	<u>2.2</u>	<u>2.2</u>	<u>2.2</u>
<b>Numerator</b>	<u>1,371</u>	<u>1,353</u>	<u>1,380</u>	<u>1,440</u>	<u>1,440</u>
<b>Denominator</b>	<u>64,949</u>	<u>59,442</u>	<u>63,184</u>	<u>65,656</u>	<u>65,656</u>
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.)					
<b>Is the Data Provisional or Final?</b>				Provisional	Provisional

**Field Level Notes**

- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2008  
**Field Note:**  
 2008 data is provisional and based upon 2007 data.
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
 2007 data is provisional.
- Section Number:** Form20\_Health Status Indicator #02A  
**Field Name:** HSI02A  
**Row Name:**  
**Column Name:**  
**Year:** 2006  
**Field Note:**  
 2006 data is final.

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

		Annual Indicator Data				
	2004	2005	2006	2007	2008	
Annual Indicator	1.7	1.8	1.7	1.8	1.8	
Numerator	1,074	1,047	1,063	1,130	1,130	
Denominator	62,603	57,476	61,068	63,384	63,384	
Check this box if you cannot report the numerator because						
1. There are fewer than 5 events over the last year, and						
2.The average number of events over the last 3 years is fewer						
than 5 and therefore a 3-year moving average cannot be						
applied.						
(Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?				Provisional	Provisional	

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2008**Field Note:**

2008 data is provisional and based upon the 2007 data.

**2. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2007**Field Note:**

2007 data is provisional.

**3. Section Number:** Form20\_Health Status Indicator #02B**Field Name:** HSI02B**Row Name:****Column Name:****Year:** 2006**Field Note:**

2006 data is final.

**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2004	2005	<b>Annual Indicator Data</b>		
			2006	2007	2008
Annual Indicator	18.2	12.2	13.0	13.1	13.1
Numerator	175	115	117	116	116
Denominator	963,046	946,320	897,508	888,587	888,587

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

**1. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data is provisional and based upon the 2007.

**2. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 data is provisional.

**3. Section Number:** Form20\_Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

2006 data is final.

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>7.0</u>	<u>4.4</u>	<u>4.8</u>	<u>5.7</u>	<u>5.7</u>
<b>Numerator</b>	<u>67</u>	<u>42</u>	<u>43</u>	<u>51</u>	<u>51</u>
<b>Denominator</b>	<u>963,046</u>	<u>946,320</u>	<u>897,508</u>	<u>888,587</u>	<u>888,587</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data is provisional and based upon the 2007.

**2. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 data is provisional.

**3. Section Number:** Form20\_Health Status Indicator #03B

**Field Name:** HSI03B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

2006 data is final.

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2004	2005	<b>Annual Indicator Data</b>		
			2006	2007	2008
Annual Indicator	36.2	28.5	34.4	35.8	35.8
Numerator	255	199	223	235	235
Denominator	705,107	699,069	647,755	657,229	657,229

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

2008 data is provisional and based upon the 2007.

**2. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

2007 data is provisional.

**3. Section Number:** Form20\_Health Status Indicator #03C

**Field Name:** HSI03C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

2006 data is final.

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	219.1	219.1	265.4	265.4	265.4
<b>Numerator</b>	2,101	2,101	2,382	2,382	2,382
<b>Denominator</b>	958,711	958,711	897,508	897,508	897,508

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is provisional, based upon 2006 data. However, since 2002, improved methods for injury data collection have been implemented. Data is based upon nonfatal hospitalized injuries.

2. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is provisional, based upon 2006 data. However, since 2002, improved methods for injury data collection have been implemented. Data is based upon nonfatal hospitalized injuries.

3. **Section Number:** Form20\_Health Status Indicator #04A

**Field Name:** HSI04A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is final. A different method of data collection was used for 2001. However, since 2002, improved methods for injury data collection have been implemented. Data is based upon nonfatal hospitalized injuries.

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	42.5	42.5	19.2	19.2	19.2
Numerator	407	407	172	172	172
Denominator	958,711	958,711	897,508	897,508	897,508

Check this box if you cannot report the numerator because  
1. There are fewer than 5 events over the last year, and  
2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is provisional, based upon 2006 data.

**2. Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is provisional, based upon 2006 data.

**3. Section Number:** Form20\_Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is final. The numerator is a low number because there were many missing e-codes.



**HEALTH STATUS INDICATOR MEASURE # 04C**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<b>Annual Indicator Data</b>				
	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>
<b>Annual Indicator</b>	<u>139.2</u>	<u>139.2</u>	<u>85.2</u>	<u>85.2</u>	<u>85.2</u>
<b>Numerator</b>	<u>980</u>	<u>980</u>	<u>552</u>	<u>552</u>	<u>552</u>
<b>Denominator</b>	<u>704,198</u>	<u>704,198</u>	<u>647,755</u>	<u>647,655</u>	<u>647,655</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Provisional

Provisional

**Field Level Notes**

1. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

Data is provisional, and based on 2006. Since 2002, the primary data source of analysis and reporting for this indicator is the Louisiana Hospital Inpatient Discharge Data (LAHIDD). LAHIDD is compiled by the Health Statistics Department of the Louisiana Office of Public Health, and EMS/Injury Research and Prevention Program analyzes the data needed for this indicator. Since participation in reporting hospital inpatient discharge data is not mandatory in Louisiana, then differences in the number, size, and type of hospitals reporting annually will affect our data reported. This variability limits year-to-year comparison analyses.

2. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

Data is provisional, and based on 2006. Since 2002, the primary data source of analysis and reporting for this indicator is the Louisiana Hospital Inpatient Discharge Data (LAHIDD). LAHIDD is compiled by the Health Statistics Department of the Louisiana Office of Public Health, and EMS/Injury Research and Prevention Program analyzes the data needed for this indicator. Since participation in reporting hospital inpatient discharge data is not mandatory in Louisiana, then differences in the number, size, and type of hospitals reporting annually will affect our data reported. This variability limits year-to-year comparison analyses.

3. **Section Number:** Form20\_Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

Data is final. The numerator is a low number because there were many missing e-codes. Since 2002, the primary data source of analysis and reporting for this indicator is the Louisiana Hospital Inpatient Discharge Data (LAHIDD). LAHIDD is compiled by the Health Statistics Department of the Louisiana Office of Public Health, and EMS/Injury Research and Prevention Program analyzes the data needed for this indicator. Since participation in reporting hospital inpatient discharge data is not mandatory in Louisiana, then differences in the number, size, and type of hospitals reporting annually will affect our data reported. This variability limits year-to-year comparison analyses. Also, since the CDC has changed the 2004 Census population data for Louisiana from 4,515,770 to 4,506,685, then the 2004 statistics reported are based on the new population data.

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	<u>40.3</u>	<u>29.6</u>	<u>35.2</u>	<u>37.7</u>	<u>42.7</u>
<b>Numerator</b>	<u>6,853</u>	<u>4,981</u>	<u>5,741</u>	<u>6,147</u>	<u>6,960</u>
<b>Denominator</b>	<u>169,957</u>	<u>168,289</u>	<u>162,944</u>	<u>162,944</u>	<u>162,944</u>

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

**2. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

**3. Section Number:** Form20\_Health Status Indicator #05A

**Field Name:** HSI05A

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2004	2005	<b>Annual Indicator Data</b>		2008
			2006	2007	
<b>Annual Indicator</b>	12.4	9.5	10.6	12.1	13.8
<b>Numerator</b>	10,059	7,685	8,723	9,162	10,466
<b>Denominator</b>	813,300	811,918	825,380	757,929	757,929

Check this box if you cannot report the numerator because  
 1. There are fewer than 5 events over the last year, and  
 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.

(Explain data in a year note. See Guidance, Appendix IX.)

Is the Data Provisional or Final?

Final

Final

**Field Level Notes****1. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2008

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

**2. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2007

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

**3. Section Number:** Form20\_Health Status Indicator #05B

**Field Name:** HSI05B

**Row Name:**

**Column Name:**

**Year:** 2006

**Field Note:**

The population source is from the 2008 population estimate from U.S. Census Bureau.

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**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	61,218	36,123	22,488	398	831	26	1,352	0
Children 1 through 4	236,939	135,061	92,468	1,512	3,520	90	4,288	0
Children 5 through 9	295,773	170,471	113,717	1,967	4,213	139	5,266	0
Children 10 through 14	294,657	170,295	113,929	1,882	4,157	120	4,274	0
Children 15 through 19	323,073	187,311	125,322	2,343	4,473	135	3,489	0
Children 20 through 24	334,156	202,540	120,525	2,385	5,192	151	3,363	0
Children 0 through 24	1,545,816	901,801	588,449	10,487	22,386	661	22,032	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	59,070	2,148	0
Children 1 through 4	228,035	8,904	0
Children 5 through 9	284,367	11,406	0
Children 10 through 14	284,303	10,354	0
Children 15 through 19	313,163	9,910	0
Children 20 through 24	321,962	12,194	0
Children 0 through 24	1,490,900	54,916	0

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**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2007    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	170	41	128	0	0	0	1	0
Women 15 through 17	2,691	1,002	1,631	17	10	0	31	0
Women 18 through 19	6,177	2,778	3,240	52	43	1	63	0
Women 20 through 34	50,818	29,689	19,002	382	858	8	879	0
Women 35 or older	5,799	3,956	1,498	30	220	0	95	0
Women of all ages	65,655	37,466	25,499	481	1,131	9	1,069	0

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	167	3	0
Women 15 through 17	2,577	114	0
Women 18 through 19	5,924	253	0
Women 20 through 34	48,292	2,500	26
Women 35 or older	5,471	296	32
Women of all ages	62,431	3,166	58

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**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2007    Is this data from a State Projection? Yes    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	585	230	350	0	4	0	1	0
Children 1 through 4	97	38	53	2	4	0	0	0
Children 5 through 9	52	31	20	0	1	0	0	0
Children 10 through 14	79	48	30	1	0	0	0	0
Children 15 through 19	300	164	129	3	3	0	1	0
Children 20 through 24	497	285	207	3	1	0	1	0
Children 0 through 24	1,610	796	789	9	13	0	3	0

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	565	12	8
Children 1 through 4	93	4	0
Children 5 through 9	51	1	0
Children 10 through 14	79	0	0
Children 15 through 19	294	6	0
Children 20 through 24	480	17	8
Children 0 through 24	1,562	40	16

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**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,211,660	699,261	467,924	8,102	17,194	510	18,669	0	2007
Percent in household headed by single parent	42.0	0.0	0.0	0.0	0.0	0.0	0.0	42.0	2007
Percent in TANF (Grant) families	1.0	0.0	0.0	0.0	0.0	0.0	0.0	1.0	2008
Number enrolled in Medicaid	570,098	200,191	325,534	1,932	4,143	247	4,321	33,730	2008
Number enrolled in SCHIP	134,727	61,226	61,224	471	1,351	51	854	9,550	2008
Number living in foster home care	4,293	0	0	0	0	0	0	4,293	2008
Number enrolled in food stamp program	259,770	0	0	0	0	0	0	259,770	2008
Number enrolled in WIC	145,667	61,733	78,859	1,156	1,342	523	2,054	0	2008
Rate (per 100,000) of juvenile crime arrests	1,000.0	0.0	0.0	0.0	0.0	0.0	0.0	1,000.0	2007
Percentage of high school drop-outs (grade 9 through 12)	10.0	0.0	0.0	0.0	0.0	0.0	0.0	10.0	2007

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,168,938	42,722	0	2007
Percent in household headed by single parent	0.0	0.0	42.0	2007
Percent in TANF (Grant) families	0.0	0.0	1.0	2008
Number enrolled in Medicaid	529,477	15,565	25,056	2008
Number enrolled in SCHIP	124,602	3,248	6,877	2008
Number living in foster home care	0	0	4,293	2008
Number enrolled in food stamp program	0	0	259,770	2008
Number enrolled in WIC	137,548	8,119	0	2008
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	1,000.0	2007
Percentage of high school drop-outs (grade 9 through 12)	0.0	0.0	10.0	2007

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**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2006    Is this data from a State Projection? No    Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	652,051
Living in urban areas	940,869
Living in rural areas	360,667
Living in frontier areas	5,227
<b>Total - all children 0 through 19</b>	<b>1,306,763</b>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

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**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2008    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	4,410,796.0
Percent Below: 50% of poverty	9.4
100% of poverty	16.1
200% of poverty	35.9

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**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2007    Is this data from a State Projection? No    Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,211,660.0
Percent Below: 50% of poverty	12.0
100% of poverty	27.0
200% of poverty	49.0



## FORM NOTES FOR FORM 21

None

### FIELD LEVEL NOTES

1. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Infants  
**Row Name:** Infants 0 to 1  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
2. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Children1to4  
**Row Name:** children 1 through 4  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
3. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Children5to9  
**Row Name:** children 5 through 9  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
4. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Children10to14  
**Row Name:** children 10 through 14  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
5. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Children15to19  
**Row Name:** children 15 through 19  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
6. **Section Number:** Form21\_Indicator 06A  
**Field Name:** S06\_Race\_Children20to24  
**Row Name:** children 20 through 24  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
7. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Infants  
**Row Name:** Infants 0 to 1  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
8. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Children1to4  
**Row Name:** children 1 through 4  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
9. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Children5to9  
**Row Name:** children 5 through 9  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
10. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Children10to14  
**Row Name:** children 10 through 14  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
11. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Children15to19  
**Row Name:** children 15 through 19  
**Column Name:**  
**Year:** 2010  
**Field Note:**  
Vital Records 2007 data final.
12. **Section Number:** Form21\_Indicator 06B  
**Field Name:** S06\_Ethnicity\_Children20to24  
**Row Name:** children 20 through 24

**Column Name:**

Year: 2010

**Field Note:**

Vital Records 2007 data final.

**13. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_Children**Row Name:** All children 0 through 19**Column Name:**

Year: 2010

**Field Note:**

Louisiana Vital Statistics preliminary 2007 data.

**14. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_SingleParentPercent**Row Name:** Percent in household headed by single parent**Column Name:**

Year: 2010

**Field Note:**

Children under age 18 who live with their own single parent either in a family or subfamily. Data Source: Notes: Updated September 2008. Population Reference Bureau, analysis of data from the U.S. Census Bureau, The data for this measure come from the 2000 and 2001 Supplementary Survey and the 2002 through 2007 American Community Survey (ACS).

**15. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_TANFPercent**Row Name:** Percent in TANF (Grant) families**Column Name:**

Year: 2010

**Field Note:**

Percent: The average number of children served by the Family Independence Temporary Assistance Program (FITAP) in a state fiscal year (July 1-June 30) per 100 children. Data Source: FITAP Numbers: Louisiana Department of Social Services, Office of Family Support, Quality Assurance Division. Population Data: Population Estimates Program, Population Division, U.S. Census Bureau Washington D.C. Release Date: August 7, 2008. Available at <http://www.census.gov/popest/estimates.php> Notes: FITAP provides cash assistance to families with children when the financial resources of the family are insufficient to meet subsistence needs. The average family consists of a mother and two children. The average grant in Louisiana is \$200 per month.

**16. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_MedicaidNo**Row Name:** Number enrolled in Medicaid**Column Name:**

Year: 2010

**Field Note:**

From Medicaid: Unduplicated Count of Eligibles by Race FFY 2008 (October 2007- September 2008). Ages 0-19. Hispanic or Latino includes Hispanic or Latino (no other race information) AND Hispanic or Latino and one or more races. Ethnicity not reported includes Invalid Race Code AND More than One Race (Hispanic or Latino not indicated) AND Unknown.

**17. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_SCHIPNo**Row Name:** Number enrolled in SCHIP**Column Name:**

Year: 2010

**Field Note:**

From Medicaid: Unduplicated Count of Eligibles by Race FFY 2008 (October 2007- September 2008). Ages 0-19. Hispanic or Latino includes Hispanic or Latino (no other race information) AND Hispanic or Latino and one or more races. Ethnicity not reported includes Invalid Race Code AND More than One Race (Hispanic or Latino not indicated) AND Unknown

**18. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_FoodStampNo**Row Name:** Number enrolled in food stamp program**Column Name:**

Year: 2010

**Field Note:**

Number: The average number of children served by the Food Stamp program in a given state fiscal year (July 1-June 30).  
Data Source: Food Stamp data: Louisiana Department of Social Services, Office of Family Support, Quality Assurance Division.

**19. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_WICNo**Row Name:** Number enrolled in WIC**Column Name:**

Year: 2010

**Field Note:**

Data is for FFY 2008. The number was derived by adding the number of infants and children that participated in the reporting year, based on the average number of vouchers. This was found to be more accurate versus using unique identifiers. Past counts of unique identifiers included children later found to be ineligible or duplicates.

The racial and ethnic breakdown were derived from the PHAME Report. Information based upon Race/Idenity as entered into PHAME. This was used to pull a percentage of race and apply to the actual participation numbers. The participation numbers are not unique pass ID's, they reflect the actual number of people served (holding WIC benefits).

**20. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_JuvenileCrimeRate**Row Name:** Rate (per 100,000) of juvenile crime arrests**Column Name:**

Year: 2010

**Field Note:**

Data source: Analysis of arrest data from the FBI's Crime in the United States 2007 (Washington, DC: Federal Bureau of Investigation, 2008), tables 5 and 69, and population data from the National Center for Health Statistics' Estimates of the July 1, 2000-July 1, 2007, United States Resident Population From the Vintage 2007 Postcensal Series by Year, County, Age, Sex, Race, and Hispanic Origin [machine-readable data files available online at <http://www.cdc.gov/nchs/about/major/dvs/popbridge/popbridge.htm>, released 9/5/2008]. Juvenile arrest rates are calculated by dividing the number of arrests of persons ages 10-17 by the number of persons ages 10-17 in the population.

**21. Section Number:** Form21\_Indicator 09A**Field Name:** HSIRace\_DropOutPercent**Row Name:** Percentage of high school drop-outs (grade 9 through 12)**Column Name:**

Year: 2010

**Field Note:**

Teenagers between the ages of 16 and 19 who are not enrolled in high school and are not high school graduates.

Notes: Updated September 2008.

The data for this measure come from the 2000 and 2001 Supplementary Survey and the 2002 through 2007 American Community Survey (ACS). The 2000 through 2004 ACS surveyed approximately 700,000 households monthly during each calendar year. Beginning in January 2005, the U.S. Census Bureau expanded the ACS sample to 3 million households (full implementation), and in January 2006 the ACS included group quarters. The ACS, fully implemented, is designed to provide annually updated social, economic, and housing data for states and communities. (Such local-area data have traditionally been collected once every ten years in the long form of the decennial census.) This measure focuses on teens ages 16 to 19 rather than young adults 16 to 24 because a large share of 18- to 24-year-olds migrate across state lines each year. The high interstate migration rates confound the connection between state policies and programs and state dropout rates. Raw numbers are rounded to the nearest thousand.

**22. Section Number:** Form21\_Indicator 09B

**Field Name:** HSIEthnicity\_SingleParentPercent

**Row Name:** Percent in household headed by single parent

**Column Name:**

**Year:** 2010

**Field Note:**

Annie E. Casey Foundation, KIDS COUNT (<http://aecf.org/kidscount/>) This is for Children under age 18 who live with their own single parent either in a family or subfamily. Updated September 2008. No further ethnicity breakdown is given.

**23. Section Number:** Form21\_Indicator 09B

**Field Name:** HSIEthnicity\_FoodStampNo

**Row Name:** Number enrolled in food stamp program

**Column Name:**

**Year:** 2010

**Field Note:**

Number: The average number of children served by the Food Stamp program in a given state fiscal year (July 1-June 30).

Data Source: Food Stamp data: Louisiana Department of Social Services, Office of Family Support, Quality Assurance Division. No further racial breakdown is given.

**24. Section Number:** Form21\_Indicator 09B

**Field Name:** HSIEthnicity\_JuvenileCrimeRate

**Row Name:** Rate (per 100,000) of juvenile crime arrests

**Column Name:**

**Year:** 2010

**Field Note:**

Data source: Analysis of arrest data from the FBI's Crime in the United States 2007 (Washington, DC: Federal Bureau of Investigation, 2008), tables 5 and 69, and population data from the National Center for Health Statistics' Estimates of the July 1, 2000-July 1, 2007, United States Resident Population From the Vintage 2007 Postcensal Series by Year, County, Age, Sex, Race, and Hispanic Origin [machine-readable data files available online at <http://www.cdc.gov/nchs/about/major/dvs/popbridge/popbridge.htm>, released 9/5/2008]. Juvenile arrest rates are calculated by dividing the number of arrests of persons ages 10-17 by the number of persons ages 10-17 in the population. No further racial breakdown is given.

**25. Section Number:** Form21\_Indicator 09B

**Field Name:** HSIEthnicity\_DropOutPercent

**Row Name:** Percentage of high school drop-outs (grade 9 through 12)

**Column Name:**

**Year:** 2010

**Field Note:**

Teenagers between the ages of 16 and 19 who are not enrolled in high school and are not high school graduates.

Notes: Updated September 2008.

The data for this measure come from the 2000 and 2001 Supplementary Survey and the 2002 through 2007 American Community Survey (ACS). The 2000 through 2004 ACS surveyed approximately 700,000 households monthly during each calendar year. Beginning in January 2005, the U.S. Census Bureau expanded the ACS sample to 3 million households (full implementation), and in January 2006 the ACS included group quarters. The ACS, fully implemented, is designed to provide annually updated social, economic, and housing data for states and communities. (Such local-area data have traditionally been collected once every ten years in the long form of the decennial census.) This measure focuses on teens ages 16 to 19 rather than young adults 16 to 24 because a large share of 18- to 24-year-olds migrate across state lines each year. The high interstate migration rates confound the connection between state policies and programs and state dropout rates. Raw numbers are rounded to the nearest thousand. No further racial breakdown is given.

**26. Section Number:** Form21\_Indicator 11

**Field Name:** S11\_total

**Row Name:** Total Population

**Column Name:**

**Year:** 2010

**Field Note:**

Source: Population Division, U.S. Census Bureau, Annual Estimates of the Resident Population for Counties of Louisiana: April 1, 2000 to July 1, 2008 (CO-EST2008-01-22). Release Date: March 19, 2009.

**27. Section Number:** Form21\_Indicator 11

**Field Name:** S11\_50percent

**Row Name:** Percent Below: 50% of poverty

**Column Name:**

**Year:** 2010

**Field Note:**

Source: QT-P34. Poverty Status in 1999 of Individuals: 2000 U.S. Census Bureau, Census 2000 Summary File 3, Matrices PCT 9, PCT50, PCT51, PCT52, PCT53, PCT 54, and PCT55.

**28. Section Number:** Form21\_Indicator 11

**Field Name:** S11\_100percent

**Row Name:** 100% of poverty

**Column Name:**

**Year:** 2010

**Field Note:**

Source: U.S. Census Bureau, Current Population Survey, 2008 Annual Social and Economic Supplement POV 46.

**29. Section Number:** Form21\_Indicator 11

**Field Name:** S11\_200percent

**Row Name:** 200% of poverty

**Column Name:**

**Year:** 2010

**Field Note:**

Source: U.S. Census Bureau, Current Population Survey, 2008 Annual Social and Economic Supplement POV 46.

**30. Section Number:** Form21\_Indicator 12

**Field Name:** S12\_Children

**Row Name:** Children 0 through 19 years old

**Column Name:**

**Year:** 2010

**Field Note:**  
Louisiana Vital Records 2007.

**31. Section Number:** Form21\_Indicator 12

**Field Name:** S12\_50percent

**Row Name:** Percent Below: 50% of poverty

**Column Name:**

**Year:** 2010

**Field Note:**

The share of children under age 18 who live in families with incomes less than 50 percent of the federal poverty level, as defined by the U.S. Office of Management and Budget. Data Source: Population Reference Bureau, analysis of data from the U.S. Census Bureau, Census 2000 Supplementary Survey, 2001 Supplementary Survey, 2002 through 2007 American Community Survey. Notes: Updated September 2008. The data for this measure come from the 2000 and 2001 Supplementary Survey and the 2002 through 2007 American Community Survey (ACS). The 2000 through 2004 ACS surveyed approximately 700,000 households monthly during each calendar year. In general but particularly for these years, use caution when interpreting estimates for less populous states or indicators representing small subpopulations, where the sample size is relatively small. Beginning in January 2005, the U.S. Census Bureau expanded the ACS sample to 3 million households (full implementation), and in January 2006 the ACS included group quarters. The ACS, fully implemented, is designed to provide annually updated social, economic, and housing data for states and communities. (Such local-area data have traditionally been collected once every ten years in the long form of the decennial census.)

The federal poverty definition consists of a series of thresholds based on family size and composition. In 2000, a 50% poverty threshold for a family of two adults and two children was \$8,731. Poverty status is not determined for people in military barracks, institutional quarters, or for unrelated individuals under age 18 (such as foster children).

**32. Section Number:** Form21\_Indicator 12

**Field Name:** S12\_200percent

**Row Name:** 200% of poverty

**Column Name:**

**Year:** 2010

**Field Note:**

The share of children under age 18 who live in families with incomes less than 200 percent of the federal poverty level, as defined by the U.S. Office of Management and Budget. Data Source: Population Reference Bureau, analysis of data from the U.S. Census Bureau, Census 2000 Supplementary Survey, 2001 Supplementary Survey, 2002 through 2007 American Community Survey. Notes: Updated September 2008. The data for this measure come from the 2000 and 2001 Supplementary Survey and the 2002 through 2007 American Community Survey (ACS). The 2000 through 2004 ACS surveyed approximately 700,000 households monthly during each calendar year. In general but particularly for these years, use caution when interpreting estimates for less populous states or indicators representing small subpopulations, where the sample size is relatively small. Beginning in January 2005, the U.S. Census Bureau expanded the ACS sample to 3 million households (full implementation), and in January 2006 the ACS included group quarters. The ACS, fully implemented, is designed to provide annually updated social, economic, and housing data for states and communities. (Such local-area data have traditionally been collected once every ten years in the long form of the decennial census.) The federal poverty definition consists of a series of thresholds based on family size and composition. In 2000, a 200% poverty threshold for a family of two adults and two children was \$34,926. Poverty status is not determined for people in military barracks, institutional quarters, or for unrelated individuals under age 18 (such as foster children).

**33. Section Number:** Form21\_Indicator 09A

**Field Name:** HSIRace\_FosterCare

**Row Name:** Number living in foster home care

**Column Name:**

**Year:** 2010

**Field Note:**

Source: Louisiana Department of Social Services/Office of Community Services. Data is for Calendar Year 2008.

**34. Section Number:** Form21\_Indicator 09B

**Field Name:** HSEthnicity\_FosterCare

**Row Name:** Number living in foster home care

**Column Name:**

**Year:** 2010

**Field Note:**

Source: Louisiana Department of Social Services/Office of Community Services. Data is for Calendar Year 2008. No further ethnic breakdown is available.